## Case 21-19099-CMG Doc 1 Filed 11/24/21 Entered 11/24/21 15:15:38 Desc Main Document Page 1 of 71

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF NEW JERSEY		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is an amended filing

### Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

rt 1: Identify Yourself			
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
Your full name			
Write the name that is on	Mary		
your government-issued	First name	First name	
example, your driver's	June		
license or passport).	Middle name	Middle name	
Bring your picture	Deppe		
meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)	
			_
•			
maiden names.			
Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-5272		
	Your full name  Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.  All other names you have used in the last 8 years Include your married or maiden names.  Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.  Deppe Last name and Suffix (Sr., Jr., II, III)  All other names you have used in the last 8 years Include your married or maiden names.  Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number	About Debtor 1:  About Debtor 2 (Spouse Only in a Joint Case):  Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.  Deppe Last name and Suffix (Sr., Jr., II, III)  All other names you have used in the last 8 years Include your married or maiden names.  Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number  About Debtor 2 (Spouse Only in a Joint Case):  All other name (Spouse Only in a Joint Case):  All other name (Spouse Only in a Joint Case):  About Debtor 2 (Spouse Only in a Joint Case):  First name  Middle name  Last name  All other name and Suffix (Sr., Jr., II, III)  All other names you have used in the last 8 years  Include your married or maiden names.

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Debtor 1 Mary June Deppe Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EIN	EIN
5.	Where you live	477 Center Ave	If Debtor 2 lives at a different address:
		Middletown, NJ 07748	Newstern Objects O'the Orate & 71D Octob
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Monmouth County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Case number (if known) Debtor 1 Mary June Deppe Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy 7. The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details How you will pay the fee about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for ☐ No. bankruptcy within the Yes. last 8 years? When Case number District 16-26078 When District Case number When Case number District 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Relationship to you Debtor When Case number, if known District Debtor Relationship to you When Case number, if known District 11. Do you rent your Go to line 12. No. residence? ☐ Yes. Has your landlord obtained an eviction judgment against you? No. Go to line 12.

this bankruptcy petition.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of

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Case number (if known) Debtor 1 Mary June Deppe Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor Go to Part 4. of any full- or part-time No. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to Chapter 11 of the proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or Bankruptcy Code, and you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, are you a small business cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 debtor or a debtor as U.S.C. § 1116(1)(B). defined by 11 U.S.C. § 1182(1)? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). Code. ☐ Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11. I am filing under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I ☐ Yes. choose to proceed under Subchapter V of Chapter 11. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention? For example, do you own perishable goods, or Where is the property? livestock that must be fed, or a building that needs urgent repairs? Number, Street, City, State & Zip Code

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Debtor 1 Mary June Deppe Case number (if known)

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a	briefing	about	credit
counseling because of:			

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 21-19099-CMG Doc 1 Filed 11/24/21 Entered 11/24/21 15:15:38 Desc Main Document Page 6 of 71

	Mary June Deppe			Case num	——————————————————————————————————————			
Par	t 6: Answer These Questi	ions for Re	porting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."					
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.	<b>Are your debts primarily business debts?</b> Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you	owe that are not consumer debts or busing	ness debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	er 7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and	■ Yes.		Do you estimate that after any exempt pour solutions will be available to distribute to unsecu				
	administrative expenses		■ No					
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-19 □ 200-99	-	☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000			
19.	How much do you estimate your assets to be worth?	<b>\$100,0</b>	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	☐ \$1,000,001 - \$10 million ☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
20.	How much do you estimate your liabilities to be?	<b>\$100,0</b>	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
Par	t 7: Sign Below							
For	you	If I have of United St If no attor documen I request I understate bankrupto 1519, and /s/ Mary Mary Ju	chosen to file under Chapter ates Code. I understand the mey represents me and I did t, I have obtained and read the relief in accordance with the and making a false statement of case can result in fines up I 3571.  June Deppe  ne Deppe of Debtor 1	relief available under each chapter, and I not pay or agree to pay someone who is he notice required by 11 U.S.C. § 342(b). chapter of title 11, United States Code, so to \$250,000, or imprisonment for up to 2 Signature of Debut	ole, under Chapter 7, 11,12, or 13 of title 11, I choose to proceed under Chapter 7.  not an attorney to help me fill out this specified in this petition.  ey or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341,			

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Debtor 1 Mary June Deppe Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ William	H. Oliver, Jr.	Date	November 24, 2021
Signature of	Attorney for Debtor		MM / DD / YYYY
William H.	Oliver, Jr.		
Printed name			
Oliver & Le	egg, LLC		
Firm name			
2240 High	way 33		
Suite 112			
Neptune, N	IJ 07753		
Number, Street, 0	City, State & ZIP Code		
Contact phone	732-988-1500	Email address	courtdocs@oliverandlegg.com
24859 NJ			
Bar number & Sta	ate		

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= common : age com =
Fill in this information to identify your case:
Debtor 1 Mary June Deppe
First Name Middle Name Last Name
Debtor 2
(Spouse if, filing) First Name Middle Name Last Name
United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY
Case number
(if known)

#### Official Form 106Sum

### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	191,850.30
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	11,268.74
	1c. Copy line 63, Total of all property on Schedule A/B	\$	203,119.04
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	232,890.53
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	102,336.43
	Your total liabilities	\$	335,226.96
ar	t 3: Summarize Your Income and Expenses		
	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,871.00
	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,319.93
ar	t 4: Answer These Questions for Administrative and Statistical Records		
i.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with yo	ur other s	chedules.
	■ Yes What kind of debt do you have?		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

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Debtor 1 Mary June Deppe Case number (if known)

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total c	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

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Ouse 21			Docu	ument F	Page 10 of 71		_		
Fill in this information	on to identify	your case and th	his filing	g:					
	Mary June Do	<u> </u>	e Name	L	Last Name				
Debtor 2 (Spouse, if filing) F	irst Name	Middle	e Name		Last Name				
United States Bankru					Last Hame				
	proy Court to							_	
Case number								☐ Check if the amended	
Official Form		•						12/15	
Part 1: Describe Each  Do you own or have a					or Have an Interest In				
<ul><li>☐ No. Go to Part 2.</li><li>■ Yes. Where is the</li></ul>	property?								
_	/e	cription	What ■ □	is the property? of Single-family hor Duplex or multi-u Condominium or	me unit building	amount of	any secured cla	ims or exemption ims on <i>Schedule</i> ns Secured by Pro	D:
Yes. Where is the  1.1  477 Center Av  Street address, if ava	/e ilable, or other desc NJ	07748-0000		Single-family hor Duplex or multi-u Condominium or Manufactured or Land	me unit building cooperative mobile home	Current va	any secured cla Who Have Clain alue of the perty?	ims on Schedule as Secured by Pro Current value portion you ov	D: operty.  of the vn?
Yes. Where is the  1.1  477 Center Av  Street address, if ava	/ <b>e</b> ilable, or other desc			Single-family hor Duplex or multi-u Condominium or Manufactured or Land Investment proper Timeshare Other	me unit building cooperative mobile home	Current va entire prop \$19 Describe t (such as fe	any secured cla Who Have Clain alue of the perty? 91,850.30	ims on Schedule as Secured by Pro Current value portion you ov	D: operty. of the vn? ,850.30
Yes. Where is the  477 Center Av  Street address, if ava  Middletown	/e ilable, or other desc NJ	07748-0000		Single-family hor Duplex or multi-u Condominium or Manufactured or Land Investment prope Timeshare Other has an interest in	me unit building r cooperative mobile home erty	Current va entire prop \$19 Describe t (such as fe	any secured cla  Who Have Clain  alue of the perty?  91,850.30  the nature of ye ee simple, tena	Current value portion you ov \$191	D: operty. of the vn? ,850.30
Yes. Where is the  477 Center Av  Street address, if ava  Middletown  City	/e ilable, or other desc NJ	07748-0000		Single-family hor Duplex or multi-u Condominium or  Manufactured or Land Investment proper Timeshare Other has an interest in Debtor 1 only Debtor 2 only Debtor 1 and De	me unit building r cooperative mobile home erty  the property? Check one	Current va entire prop \$15  Describe t (such as fra a life estate	any secured clawho Have Clain alue of the perty? 91,850.30 the nature of your see simple, tensive), if known.	Current value portion you ov \$191	D: operty. of the vn? ,850.30
Yes. Where is the  477 Center Av  Street address, if ava  Middletown  City  Monmouth	/e ilable, or other desc NJ	07748-0000	Who h	Single-family hor Duplex or multi-u Condominium or  Manufactured or Land Investment proper Timeshare Other has an interest in Debtor 1 only Debtor 2 only Debtor 1 and De At least one of the	me unit building cooperative mobile home erty the property? Check one botor 2 only ne debtors and another wish to add about this ite	Current va entire prop \$15  Describe t (such as fr a life estate)	any secured clawho Have Clain alue of the perty? 91,850.30 the nature of yee simple, tense, if known.	Current value portion you ov \$191  our ownership in ancy by the entire	D: operty. of the vn? ,850.30

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

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Debt	tor 1 N	lary June Dep	pe		Case number (if known)	
3. <b>C</b> a	ars, vans	, trucks, tractor	s, sport utility ve	ehicles, motorcycles		
П	No					
_	Yes					
3.1	Make:	2002 Merce	des	Who has an interest in the property? Check one		red claims or exemptions. Put secured claims on Schedule D:
	Model:			Debtor 1 only		re Claims Secured by Property.
	Year:		475000	Debtor 2 only	Current value of the	
		nate mileage: formation:	175000	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire property?	portion you own?
				— At least one of the debtors and another	*=	
				☐ Check if this is community property (see instructions)	\$500	.00 \$500.00
Ex				nd other recreational vehicles, other vehicles atercraft, fishing vessels, snowmobiles, motorcy		
.p	ages you	have attached	for Part 2. Write	rn for all of your entries from Part 2, includin that number here		\$500.00
Part			and Household Ite			Occurrent control of the
٠		, ,	·	terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
Е		goods and furn Major appliances		s, china, kitchenware		
	Yes. De	escribe				
		f	urniture			\$1,500.00
	l No	Televisions and		eo, stereo, and digital equipment; computers, p nedia players, games	rinters, scanners; music c	collections; electronic devices
		С	ell phone/med	ia players		\$500.00
<i>E</i>	xamples: No Yes. De		s, memorabilia, co	prints, or other artwork; books, pictures, or othe	er art objects; stamp, coin	, or baseball card collections;
E			aphic, exercise, ar	nd other hobby equipment; bicycles, pool tables	s, golf clubs, skis; canoes	and kayaks; carpentry tools;
_	_	escribe				
	Firearms Examples No	: Pistols, rifles, s	shotguns, ammun	ition, and related equipment		
		escribe				

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Debto	or 1 Mary June De	eppe	Case number (if known)	
	lothes	thos fure loothor coats do	esigner wear, shoes, accessories	
	No	illes, luis, leather coats, uc	esigner wear, snoes, accessones	
	Yes. Describe			
	ı			<b>***</b>
	ļ	clothing		\$500.00
	ewelry Evamples: Everyday jew	velry costume iewelry eng	agement rings, wedding rings, heirloom jewelry, watches, gems,	and silver
	No	elly, costume jewelly, eng	agement migs, wedding migs, nemoom jeweny, watches, gems,	goid, Silvei
	Yes. Describe			
	ı			A4 =00 00
		jewelry		\$1,500.00
-	<b>on-farm animals</b> Examples: Dogs, cats, b	irde horeos		
	No	1103, 1101363		
	Yes. Describe			
11 4.		havaahald itawa wax di		
_	n <b>y otner personal and</b> No	nousenoia items you aid	d not already list, including any health aids you did not list	
	Yes. Give specific info	rmation		
15.	Add the dollar value o	f all of your entries from	Part 3, including any entries for pages you have attached	
				\$4,000.00
Part 4	Describe Your Financi	al Assets		
Do yo	ou own or have any le	gal or equitable interest i	n any of the following?	Current value of the
				portion you own? Do not deduct secured
				claims or exemptions.
16. <b>C</b>	ash			
		ave in your wallet, in your h	nome, in a safe deposit box, and on hand when you file your petit	ion
	No			
	Yes			
17. <b>D</b>	eposits of money			
E			counts; certificates of deposit; shares in credit unions, brokerage ts with the same institution, list each.	houses, and other similar
	No	you have multiple account	ts with the same institution, list each.	
	Yes		Institution name:	
		17.1.	WF xxx2857	\$1,505.08
			WF xxx3922	¢4 007 66
		17.2.	WF XXX3922	\$1,007.66
		r publicly traded stocks	prokerage firms, money market accounts	
	No		nenerage mine, meney mamer accounts	
	Yes	Institution or issue	r name:	
10 N	on-nublicly traded etc	ck and interests in incer	porated and unincorporated businesses, including an intere	et in an IIC nartnership
	nd joint venture	on and interests in incorp	poracea and unincorporated businesses, including all littere	or in an LLO, partileronip,
	No			
	Yes. Give specific info	rmation about them		
		Name of entity:	% of ownership:	

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Debtor 1 Case number (if known) Mary June Deppe 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information...... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits: unpaid loans you made to someone else ■ No  $\square$  Yes. Give specific information..

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D	ebtor 1 Mary June Dep	рре	Case number (if known)	
31	. Interests in insurance po Examples: Health, disabil ☐ No	olicies ity, or life insurance; health savings account (HSA); c	redit, homeowner's, or renter's insura	ince
		e company of each policy and list its value.  Company name:	Beneficiary:	Surrender or refund value:
		Wilco Whole Life Ins Policy x2781		\$3,356.00
		American Term Life Ins Policy		\$0.00
		North Amer Term Life Ins Policy		\$0.00
		Wilco Life Ins Policy x2781		\$0.00
		Wilco Life Ins Policy x2781		\$0.00
33	someone has died.  No Yes. Give specific information.  Claims against third part Examples: Accidents, em	ties, whether or not you have filed a lawsuit or ma ployment disputes, insurance claims, or rights to sue	nde a demand for payment	cove property because
	Yes. Describe each claim	Possible Claim against illegal de	bt adjuster	\$900.00
	Other contingent and un     No     ☐ Yes. Describe each clai     Any financial assets you     No		terclaims of the debtor and rights t	o set off claims
24	☐ Yes. Give specific inform		ion for marco you have attached	
31		all of your entries from Part 4, including any entri		\$6,768.74
P	art 5: Describe Any Business	Related Property You Own or Have an Interest In. List an	y real estate in Part 1.	
	■ No. Go to Part 6.  Yes. Go to line 38.	or equitable interest in any business-related property?		
Pa		I Commercial Fishing-Related Property You Own or Have rest in farmland, list it in Part 1.	an Interest In.	
46	No. Go to Part 7.  Yes. Go to line 47.	legal or equitable interest in any farm- or comme	rcial fishing-related property?	
P	art 7: Describe All Prope	rty You Own or Have an Interest in That You Did Not List.	Above	

Describe All Property You Own or have an interest in That You Did Not List Above

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Deb	mary June Deppe		Case number (if known)	
53. l	Do you have other property of any kind you did not already list?  Examples: Season tickets, country club membership			
	No			
	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write that	number here		\$0.00
Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$191,850.30
56.	Part 2: Total vehicles, line 5	\$500.00		
57.	Part 3: Total personal and household items, line 15	\$4,000.00		
58.	Part 4: Total financial assets, line 36	\$6,768.74		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$11,268.74	Copy personal property total	\$11,268.74
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$203,119.04

Official Form 106A/B Schedule A/B: Property page 6

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Fill in this infor				
Debtor 1	Mary June Deppe	·		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JERSEY		
Case number _				Check if this is an
				amended filing

### Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	/ the P	roperty	You	Claim as	Exem	pt

1.	Which set of exemptions are you claiming	? Check one only, ever	n if your spouse is filing with you.	
	☐ You are claiming state and federal nonban	kruptcy exemptions. 1	1 U.S.C. § 522(b)(3)	
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)		
2.	For any property you list on Schedule A/B	that you claim as exe	mpt, fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption

	•			
	Copy the value from Schedule A/B	Chec	ck only one box for each exemption.	
477 Center Ave Middletown, NJ 07748 Monmouth County FMV \$213,167 Less COS Sale \$ 21,316 Line from <i>Schedule A/B</i> : 1.1	\$191,850.30		\$23,062.26  100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(1)
2002 Mercedes 175000 miles Line from Schedule A/B: 3.1	\$500.00		\$500.00	11 U.S.C. § 522(d)(2)
LINE HOLL Schedule A/B. 3.1			100% of fair market value, up to any applicable statutory limit	
furniture Line from Schedule A/B: 6.1	\$1,500.00		\$1,500.00	11 U.S.C. § 522(d)(3)
Life from Schedule A/B. G. I			100% of fair market value, up to any applicable statutory limit	
cell phone/media players Line from Schedule A/B: 7.1	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)
Elite Horii Goriedale A/D. 111			100% of fair market value, up to any applicable statutory limit	
clothing Line from Schedule A/B: 11.1	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)
LINE HOTH Schedule A/B. 11.1			100% of fair market value, up to any applicable statutory limit	

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Debt	or 1 Mary June Deppe			Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	jewelry Line from <i>Schedule A/B</i> : <b>12.1</b>	\$1,500.00		\$1,500.00	11 U.S.C. § 522(d)(4)
,				100% of fair market value, up to any applicable statutory limit	
	WF xxx2857 Line from Schedule A/B: 17.1	\$1,505.08		\$1,505.08	11 U.S.C. § 522(d)(5)
	Line Horr Schedule AVB. 17.1			100% of fair market value, up to any applicable statutory limit	
	WF xxx3922 Line from Schedule A/B: 17.2	\$1,007.66		\$1,007.66	11 U.S.C. § 522(d)(5)
	Line from Schedule AVB. 17.2			100% of fair market value, up to any applicable statutory limit	
	Wilco Whole Life Ins Policy x2781 Line from Schedule A/B: 31.1	\$3,356.00		\$3,356.00	11 U.S.C. § 522(d)(8)
	Line nom <i>Schedule AVB.</i> 31.1			100% of fair market value, up to any applicable statutory limit	
	Possible Claim against illegal debt adjuster	\$900.00		\$900.00	11 U.S.C. § 522(d)(5)
	Line from Schedule A/B: 33.1			100% of fair market value, up to any applicable statutory limit	
	Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every			filed on or after the date of adjustme	ent.)
	■ No				
	Yes. Did you acquire the property cove	red by the exemption w	ithin 1	,215 days before you filed this case	??
	□ No	•		-	

☐ Yes

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			Document	Page 1	.8 of 71		
Fill in th	nis informa	ation to identify you	ır case:				
Debtor 1	1	Mary June Depp	)A				
Bosto		First Name	Middle Name	Last Name		-	
Debtor 2						_	
(Spouse if,	, filing)	First Name	Middle Name	Last Name			
United S	States Bank	kruptcy Court for the:	DISTRICT OF NEW JERSE	ΞΥ		_	
Case nu	ımbor						
(if known)	imber					☐ Chec	c if this is an
						amen	ded filing
O((; - ; -		400D					
	al Form	-		_			
Sche	dule [	D: Creditors	Who Have Claims	<u>s Secure</u>	ed by Propert	У	12/15
			two married people are filing toge number the entries, and attach it t				
1. Do any	creditors ha	ave claims secured by	your property?				
	lo. Check t	his box and submit t	his form to the court with your ot	ther schedules.	. You have nothing else	to report on this form.	
■ Y	es. Fill in a	all of the information	below.				
Part 1:	List All	Secured Claims					
			nore than one secured claim, list the c	creditor separately	v for	Column B	Column C
each clair	m. If more th	nan one creditor has a p	articular claim, list the other creditors			Value of collateral	Unsecured portion
	ne, list trie cia	aims in aipnabelicai ord	er according to the creditor's name.		value of collateral.	that supports this claim	If any
$\overline{}$	ay Servici editor's Name	ng	Describe the property that secure		\$232,890.53	\$191,850.30	\$41,040.23
CIE	editor's Name		477 Center Ave Middletov   07748 Monmouth County				
			FMV \$213,167 Less COS				
			21,316				
P	D Box 880	009	As of the date you file, the claim i apply.	is: Check all that			
CI	nicago, IL	60680-1009	Contingent				
Nui	mber, Street, C	City, State & Zip Code	Unliquidated				
Who ow	es the deh	t? Check one.	☐ Disputed  Nature of lien. Check all that app	alv.			
_		tr check one.	☐ An agreement you made (such a	-	ecured		
■ Debto	•		car loan)	as mortgage or se	ecureu		
	or 1 and Debt	tor 2 only	☐ Statutory lien (such as tax lien, r	mechanic's lien)			
		debtors and another	☐ Judgment lien from a lawsuit	,			
		m relates to a	Other (including a right to offset)				
com	munity debt						
Date deb	t was incurr	red	Last 4 digits of account nu	umber 4207	7		
			<u>-</u>				
					4000	1	
		•	olumn A on this page. Write that nu he dollar value totals from all page		\$232,89		
	hat number		ne donar value totals from all page	, <b>5.</b>	\$232,89	90.53	
Part 2:	I ist ∩the	ers to Be Notified fo	r a Debt That You Already List	tad			
			notified about your bankruptcy for		already listed in Part 1 F	or example if a collection	on agency is trying
to collec	t from you fo for any of th	or a debt you owe to s	omeone else, list the creditor in Pa in Part 1, list the additional creditor	art 1, and then lis	st the collection agency he	ere. Similarly, if you have	more than one
[]							
		oer, Street, City, State &	Zip Code	On w	hich line in Part 1 did you e	nter the creditor? 2.1	
		America, N.a arese Circ		l aet /	4 digits of account number		
	Tampa, F			Last	. s.g.to or account number		

Official Form 106D

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Debtor 1  Mary June Deppe First Name Middle Name Last Name  Debtor 2 (Spouse if, filing) First Name Middle Name Last Name  United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY  Case number (if known)  Check if this is an amended filling  Difficial Form 106E/F  Schedule E/F: Creditors Who Have Unsecured Claims  12/15  Leas complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party ny executory contracts or unexpired leases that could result in a claim. Also list executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (official Form 106/B) and on the continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and cumber (if known).  Part 1: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Pa  1. If more than one creditor holds a particular claim, list the other creditors in Part 3.  (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)		nation to identify your	Document	Page 19 of	<i>/</i> 1			
Debtor 2   Spouse if, filing  First Name   Middle Name   Last Name	Debtor 1		case:					
Debtor 2 Spouse If, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY  Case number If known)    Check if this is an amended filing		Mary June Depne		,				
United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY  Case number  (It known)    Check if this is an amended filling    Check if this is an amended filling   Check if this is				Last Name				
United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY  Case number [ff known)		E	AC.111. A1					
Case number (if Incown)    Check if this is an amended filling	Spouse if, filing)	First Name	Middle Name	Last Name				
Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims  as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party ny executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule 6: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule 6: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Sched 1: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Atta e Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and cumber (if known).  Part 1:  List All of Your PRIORITY Unsecured Claims  1	Jnited States Ban	kruptcy Court for the:	DISTRICT OF NEW JERSEY					
Difficial Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims  12/15  The as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party ny executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule Arb: Property (Official Form 106A/B) and on schedule of Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule C: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Atta neconitive contracts on Schedule Arb. Property (Official Form 106A/B) and on schedule of Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and cumber (if known).  Part 13 List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?  No. Go to Part 2.  Yes.  2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim has phabetical order according to the creditors in part.  If nore than one creditor holds a particular claim, list the other creditors in part 3.  (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)  Internal Revenue Service  Last 4 digits of account number  Priority Creditor's Name  Special Procedures  Bankruptcy Section  P.O. Box 724  Springfield, NJ 07081  Number Street City State Zip Code  When was the debt incurred?  As of	Case number							
Difficial Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims  12/15  Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party provided by the party of th	if known)		<del></del>				Check if the	nis is an
le as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party ny executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Contracts and Unexpired Leases (Official Form 106A/B) and on obtained use of Executory Contracts and Unexpired Leases (Official Form 106A/B). Do not include any creditors with partially secured claims that are listed in Schedule 2: Executory Contracts and Unexpired Leases (Official Form 106B/B). Do not not clude any creditors with partially secured claims that are listed in Schedule 2: Executory Contracts and Unexpired Leases (Official Form 106B/B). Do not not clude any creditors with partially secured claims that are listed in Schedule 2: Executory Contracts and Unexpired Leases (Official Form 106B/B) and on other continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and cumber (if known).  Part 1: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?    No. Go to Part 2.							amended	filing
As of the dulle E/F: Creditors Who Have Unsecured Claims  12/15  De as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party my executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule AB: Property (Official Form 106A) B) not not include any creditors with partially secured claims that are listed in Schedule C: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Atta ne Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and commer (if known).  Part 1: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?  Yes.  2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Path Internal Revenue Service  Last 4 digits of account number  When was the debt incurred?  When was the debt incurred?  Bankruptcy Section  P.O. Box 724  Springfield, NJ 07081  Number Street City State Zip Code  Who incurred the debt? Check one.  Contingent	Official Form	106F/F						
te as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party ny executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on chedule G: Executory Contracts and Unexpired Leases (Official Form 106A). Do not include any creditors with partially secured claims that are listed in Schedule C: Executory Contracts and Unexpired Leases (Official Form 106A). Do not include any creditors with partially secured claims that are listed in Schedule C: Executory Contracts and Unexpired Leases (Official Form 106A). Do not include any creditors with partially secured claims that are listed in Schedule C: Executory Contracts and Unexpired Leases (Official Form 106A/B) and on checking the continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and cumber (if known).  Part 1: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?    No. Go to Part 2.			ho Have Unsecured	Claims				12/15
ny executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule AlB: Property (Official Form 106A/B) and on include G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and cumber (if known).  Part1: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?  No. Go to Part 2.  Yes.  2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.  (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)  Total claim Priority amount Nonpriority amount  Nonpriority amount  Nonpriority amount  1. Internal Revenue Service Last 4 digits of account number Unknown \$0.00 \$CCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCC					or creditors with NONE	PIODITY of		
List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?  ☐ No. Go to Part 2.  ☐ Yes.  2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Pa 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.  (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)  Total claim Priority amount Nonpriority amount  Nonpriority amount  Ventory Priority Creditor's Name  Special Procedures  Bankruptcy Section  P.O. Box 724  Springfield, NJ 07081  Number Street City State Zip Code  Who incurred the debt? Check one.  ☐ Contingent	chedule G: Executor: Creditors Who Ha	ory Contracts and Unexpir ave Claims Secured by Pro	red Leases (Official Form 106G). Do operty. If more space is needed, co	not include any cre by the Part you need	ditors with partially se , fill it out, number the	cured claims entries in th	s that are list ne boxes on t	ed in Schedule he left. Attach
1. Do any creditors have priority unsecured claims against you?  □ No. Go to Part 2.  ■ Yes.  2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Path. If more than one creditor holds a particular claim, list the other creditors in Part 3.  (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)  Total claim Priority amount Nonpriority amount  Nonpriority amount  2.1 Internal Revenue Service Last 4 digits of account number Unknown \$0.00 \$CCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCC	•	ge to this page. If you have	e no information to report in a rait,	do not me that i art	. On the top of any aud	itional page	s, write your	name and case
No. Go to Part 2.  ■ Yes.  2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Path. If more than one creditor holds a particular claim, list the other creditors in Part 3.  (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)  Total claim Priority amount Nonpriority amount.  Nonpriority amount Nonpriority amounts. If a creditor is name. If you have more than two priority unsecured claims, fill out the Continuation Page of Path. If more than one creditor holds a particular claim, list the other creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Path. If more than one creditor holds a particular claim, list the other creditor's name and the instruction booklet.)  Total claim Priority Nonpriority amounts. If a claim is the creditor is name and the continuation Page of Path. If more than one creditor is name. If you have more than two priority unsecured claims, fill out the Continuation Page of Path. If we have more than two priority unsecured claims, fill out the Continuation Page of Path. If we have more than two priority unsecured claims, fill out the Continuation Page of Path. If we have more than two priority unsecured claims, fill out the Continuation Page of Path. If we have more than two priority unsecured claims, fill out the Continuation Page of Path. If we have more than two priority unsecured claims, fill out the Continuation Page of Path. If we have more than two priority unsecured claims, fill out the Continuation Page of Path. If we have more	Part 1: List All	of Your PRIORITY Un	secured Claims					
List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Path 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.  (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)  Total claim Priority Nonpriority amount.  Nonpriority amount Nonpriority amount.  Internal Revenue Service Last 4 digits of account number Unknown \$0.00 \$0.0	I. Do any creditor	s have priority unsecured	claims against you?					
List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Patrick 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.  (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)  Total claim Priority Monpriority amount  Nonpriority amount  Nonpriority amount  Last 4 digits of account number Unknown \$0.00 \$C  Priority Creditor's Name  Special Procedures  Bankruptcy Section  P.O. Box 724  Springfield, NJ 07081  Number Street City State Zip Code  As of the date you file, the claim is: Check all that apply  Who incurred the debt? Check one.	☐ No. Go to Pa	ırt 2.						
identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Path. If more than one creditor holds a particular claim, list the other creditors in Part 3.  (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)  Internal Revenue Service  Priority Creditor's Name  Special Procedures  Bankruptcy Section  P.O. Box 724  Springfield, NJ 07081  Number Street City State Zip Code  Who incurred the debt? Check one.  Contingent	Yes.							
Internal Revenue Service Priority Creditor's Name Special Procedures Bankruptcy Section P.O. Box 724 Springfield, NJ 07081 Number Street City State Zip Code Who incurred the debt? Check one.  Total claim Priority amount  Number Unknown \$0.00 \$0  When was the debt incurred?  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  Contingent	identify what type possible, list the	e of claim it is. If a claim has claims in alphabetical order	s both priority and nonpriority amounts r according to the creditor's name. If y	i, list that claim here a ou have more than tw	and show both priority an	d nonpriority	amounts. As	much as
Internal Revenue Service Priority Creditor's Name Special Procedures Bankruptcy Section P.O. Box 724 Springfield, NJ 07081 Number Street City State Zip Code Who incurred the debt? Check one.    As of the date you file, the claim is: Check all that apply   Contingent   Contingen	(For an explanati	ion of each type of claim, se	ee the instructions for this form in the	nstruction booklet.)				
Priority Creditor's Name  Special Procedures  Bankruptcy Section  P.O. Box 724  Springfield, NJ 07081  Number Street City State Zip Code  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  Who incurred the debt? Check one.					Total claim	•		
Special Procedures Bankruptcy Section P.O. Box 724 Springfield, NJ 07081 Number Street City State Zip Code When was the debt incurred?  As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one.	2.1 Internal	Revenue Service	Last 4 digits of accour	t number	Unknown			\$0.00
Bankruptcy Section P.O. Box 724 Springfield, NJ 07081 Number Street City State Zip Code Who incurred the debt? Check one.  As of the date you file, the claim is: Check all that apply Contingent	•				_			·
P.O. Box 724  Springfield, NJ 07081  Number Street City State Zip Code  Who incurred the debt? Check one.  As of the date you file, the claim is: Check all that apply  Contingent			when was the debt inc	urrea?		-		
Number Street City State Zip Code  As of the date you file, the claim is: Check all that apply  Who incurred the debt? Check one.  Contingent								
Who incurred the debt? Check one.			A - of the date was file	dha alaimaia. Oh aala	all that areals			
	Number Str	, ,	_	the claim is: Check	ан тлат арріу			
Debtor Formy     Uniquidated	Who incurred		· ·					
Double-Cont.	_		Unliquidated					
	Debtor 1 on							
· <b>-</b>	■ Debtor 1 on	nly	☐ Disputed	vourad alaimi				
2 / K load one of the desire and another	■ Debtor 1 on □ Debtor 2 on □ Debtor 1 an	nly nd Debtor 2 only	☐ Disputed  Type of PRIORITY uns					
☐ Check if this claim is for a community debt  Is the claim subject to offset?  ☐ Claims for death or personal injury while you were intoxicated	☐ Debtor 1 on☐ Debtor 2 on☐ Debtor 1 an☐ At least one☐	olly  and Debtor 2 only  be of the debtors and another	☐ Disputed  Type of PRIORITY uns  ☐ Domestic support ob	ligations				
Is the claim subject to offset?	■ Debtor 1 on □ Debtor 2 on □ Debtor 1 an □ At least one □ Check if thi	olly  and Debtor 2 only  be of the debtors and another  is claim is for a communi	☐ Disputed  Type of PRIORITY uns  ☐ Domestic support of  ity debt  ☐ Taxes and certain of	ligations her debts you owe the				
No Other. Specify	■ Debtor 1 on □ Debtor 2 on □ Debtor 1 an □ At least one □ Check if the Is the claim su	olly  and Debtor 2 only  be of the debtors and another  is claim is for a communi	☐ Disputed  Type of PRIORITY uns  Domestic support of  ity debt ☐ Taxes and certain of ☐ Claims for death or p	ligations her debts you owe the personal injury while y	ou were intoxicated			

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Debto	r 1 Mary June Deppe	Case numl	ber (if known)		
2.2	State of New Jersey	Last 4 digits of account number	Unknown	\$0.00	\$0.00
	Priority Creditor's Name Department of the Treasury Division of Taxation P.O. Box 187 Trenton, NJ 08695-0187	When was the debt incurred?			
	Number Street City State Zip Code	As of the date you file, the claim is: Check all tha	at apply		
٧	Vho incurred the debt? Check one.	☐ Contingent			
•	Debtor 1 only	☐ Unliquidated			
	Debtor 2 only	☐ Disputed			
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
[	☐ At least one of the debtors and another	☐ Domestic support obligations			
_	☐ Check if this claim is for a community debt	■ Taxes and certain other debts you owe the gove	ernment		
	s the claim subject to offset?	☐ Claims for death or personal injury while you we			
ı	No	☐ Other. Specify			
	☐Yes				
4. Lis	aim, list the creditor separately for each claim. For each	alphabetical order of the creditor who holds each the claim listed, identify what type of claim it is. Do not not a Part 3.If you have more than three nonpriority unsections.	list claims already included in Pa	art 1. If more than one	cured
4.1	Ani Orthonoodiaa	Last 4 digits of account number			0.00
4.1	Ani Orthopaedics Nonpriority Creditor's Name	Last 4 digits of account number			0.00
	Suite 21, Bldg. #2	When was the debt incurred?			
	1 Bethany Road Hazlet, NJ 07730				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all	that apply		
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:			
	☐ At least one of the debtors and another	Student loans			
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ment or divorce that you did not		
	■ No	$\square$ Debts to pension or profit-sharing plans, and	other similar debts		
	□ Yes	Other Specify			

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Debtor	1 Mary June Deppe	Case number (if known)	
4.2	Barclays Bank Delaware Nonpriority Creditor's Name	Last 4 digits of account number 8426	\$5,500.00
	Po Box 8803	When was the debt incurred?	
	Wilmington, DE 19899		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	Continued	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
		☐ Student loans	
	☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.3	Bathroom Pro	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name		
	1545 Route 37 W Suite 6	When was the debt incurred?	
	Toms River, NJ 08755-4985  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the daminis. Oneon all that apply	
	_	☐ Contingent	
	Debtor 1 only	☐ Unliquidated	
	☐ Debtor 2 only	☐ Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.4	Boscov's	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name	Last 4 digits of account number	Olikilowii
	PO Box 13601	When was the debt incurred?	
	Philadelphia, PA 19101-3601		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	Debtor 1 only	☐ Unliquidated	
	☐ Debtor 2 only	☐ Disputed	
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
		_	
	Yes	Other. Specify	

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Case number (if known)

Deb	וסר ו wary June Deppe	Case number (if known)	
4.5	Capital One	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name 4851 Cox Rd	When was the debt incurred?	
	Glen Allen, VA 23060  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	Debtor 1 only	☐ Unliquidated	
	Debtor 2 only	☐ Disputed	
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.6	Capital One Bank Usa N	Last 4 digits of account number 9847	\$2,915.00
	Nonpriority Creditor's Name 15000 Capital One Dr Richmond, VA 23238	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	Contingent	
	☐ Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	_	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.7	Certified Credit & Collection	Last 4 digits of account number 9098	\$271.08
	Nonpriority Creditor's Name P.O. Box 336	When was the debt incurred?	
	Raritan, NJ 08869		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	■ Debtor 1 only	☐ Unliquidated	
	Debtor 2 only	•	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Various accounts	

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Debto	Mary June Deppe	Case number (if known)	
4.8	Comenity Bank/avenue  Nonpriority Creditor's Name	Last 4 digits of account number 2599	\$845.00
	Po Box 182789	When was the debt incurred?	
	Columbus, OH 43218		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	Debtor 1 only	☐ Unliquidated	
	☐ Debtor 2 only	☐ Disputed	
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.9	Comenity Bank/capitsal fbb	Last 4 digits of account number 5883	\$659.00
4.5	Nonpriority Creditor's Name	Last 4 digits of account number 5003	φ039.00
	Po Box 18125	When was the debt incurred?	
	Columbus, OH 43218		
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	<u> </u>	☐ Contingent	
	Debtor 1 only	☐ Unliquidated	
	Debtor 2 only	Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.10	Comenity Bank/fashbug	Last 4 digits of account number 5148	\$1,958.00
	Nonpriority Creditor's Name Po Box 182272	When was the debt incurred?	
	Columbus, OH 43218  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	■ Debtor 1 only	☐ Unliquidated	
	Debtor 2 only	☐ Disputed	
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other Consider	
	<b>—</b> 103	Other. Specify	

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Debtor	Mary June Deppe	Case number (if known)		
4.11	Credit First Nationa	Last 4 digits of account number 4679	\$269.00	
	Nonpriority Creditor's Name 6275 Eastland Rd Brookpark, OH 44142	When was the debt incurred?		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.  Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	_	Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another	☐ Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify		
4.12	Credit One Bank	Last 4 digits of account number 9787	\$739.00	
	Nonpriority Creditor's Name P.O. box 98873	When was the debt incurred?		
	Las Vegas, NV 89193  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:		
	☐ At least one of the debtors and another	Student loans		
	☐ Check if this claim is for a community debt			
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes	Other. Specify		
4.13	Discover	Last 4 digits of account number 4703	\$3,688.00	
	Nonpriority Creditor's Name			
	P.O. Box 71084 Charlotte. NC 28272	When was the debt incurred?		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:  ☐ Student loans		
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify		
		- ····· - poon,		

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Debto	Mary June Deppe	Case number (if known)		
4.14	Dr. Chi I. Lee	Last 4 digits of account number	Unknown	
	Nonpriority Creditor's Name 717 N Beers Street	When was the debt incurred?		
	Holmdel, NJ 07733	When was the dept incurred:		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent		
	■ Debtor 1 only	☐ Unliquidated		
	Debtor 2 only	·		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:		
	☐ At least one of the debtors and another	Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify		
4.15	Fingerhut Direct Marketing	Last 4 digits of account number 0672	Unknown	
1.10	Nonpriority Creditor's Name		OHRHOWH	
	Customer Service	When was the debt incurred?		
	6250 Ridgewood Rd.			
	Saint Cloud, MN 56303  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	_		
	■ Debtor 1 only	Contingent		
	☐ Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	_	☐ Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	_	☐ Debts to pension or profit-sharing plans, and other similar debts		
	■ No	· · · · · · · · · · · · · · · · · · ·		
	Yes	Other. Specify		
4.16	First Svgs Bk-blaze	Last 4 digits of account number 3990	\$273.00	
	Nonpriority Creditor's Name 5501 S Broadband Ln	When was the debt incurred?		
	Sioux Falls, SD 57108			
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent		
	■ Debtor 1 only	☐ Unliquidated		
	☐ Debtor 2 only	☐ Disputed		
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:		
	☐ At least one of the debtors and another	Student loans		
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes	■ Other. Specify		
	— ·	— Other. Opecity		

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Debtor	1 Mary June Deppe	Case number (if known)		
4.17	Fortiva	Last 4 digits of account number 7351	\$2,338.00	
	Nonpriority Creditor's Name Att Bankruptcy PO Box 105555	When was the debt incurred?		
	Atlanta, GA 30348  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	□ Yes	Other. Specify		
4.18	GECRB/Lowes Nonpriority Creditor's Name	Last 4 digits of account number	\$577.00	
	P.O. Box 965005 Orlando, FL 32896	When was the debt incurred?		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent		
	■ Debtor 1 only	☐ Unliquidated		
	☐ Debtor 2 only	☐ Disputed		
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:		
	☐ At least one of the debtors and another	☐ Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify		
4.19	GECRB/Modell's	Last 4 digits of account number 4783	\$385.00	
	Nonpriority Creditor's Name P.O. Box 960014	When was the debt incurred?		
	Orlando, FL 32896  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:		
	☐ At least one of the debtors and another	☐ Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes	Other. Specify		

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Debto	Mary June Deppe	Case number (if known)		
4.20	GECRB/Mohawk Floorscape	Last 4 digits of account number	\$385.00	
	Nonpriority Creditor's Name P.O. Box 960014	When was the debt incurred?		
	Orlando, FL 32896			
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only			
	Debtor 2 only	Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:  ☐ Student loans		
	☐ Check if this claim is for a community debt			
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify		
4.21	Home Depot	Last 4 digits of account number 0794	\$1,016.00	
	Nonpriority Creditor's Name P.O. Box 182676	When was the debt incurred?		
	Columbus, OH 43218-2676  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	As of the date you me, the daim is. Oneok all that apply		
	Debtor 1 only	☐ Contingent		
	_ ′	☐ Unliquidated		
	Debtor 2 only	☐ Disputed		
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:		
	☐ At least one of the debtors and another	☐ Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify		
4.22	Kay Jewelers	Last 4 digits of account number 2273	\$108.00	
	Nonpriority Creditor's Name co Sterling Jewelers	When was the debt incurred?	<b>V.00.00</b>	
	PO Box 1799			
	Akron, OH 44309			
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	☐ Unliquidated		
	☐ Debtor 2 only	☐ Disputed		
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:		
	☐ At least one of the debtors and another	Student loans		
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes	Other. Specify		
	- <del>-</del>	— Onici. Opedity		

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Debtor	1 Mary June Deppe	Case number (if known)	
4.23	Kohls/capital One	Last 4 digits of account number 8419	\$1,025.00
	Nonpriority Creditor's Name N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	Debtor 1 only	☐ Unliquidated	
	☐ Debtor 2 only	☐ Disputed	
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.24	Macy's	Last 4 digits of account number	\$1,719.00
	Nonpriority Creditor's Name P.O. Box 183083	When was the debt incurred?	
	Columbus, OH 43218		
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_	☐ Contingent	
	Debtor 1 only	☐ Unliquidated	
	Debtor 2 only	☐ Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.25	MCS Claim Services, Inc.	Last 4 digits of account number 2037	Unknown
	Nonpriority Creditor's Name 123 Frost St., Suite 150 Westbury, NY 11590-5027	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	

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Debtor	1 Mary June Deppe	Case number (if known)	
4.26	Meridan Health	Last 4 digits of account number 6517	\$25.00
	Nonpriority Creditor's Name	When we the debt incorred?	
	Po Box 9319 Trenton, NJ 08650	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	Пол	
	■ Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.27	Merrick Bank Corp	Last 4 digits of account number 4558	\$1,402.00
	Nonpriority Creditor's Name		<b>,</b> ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,
	Po Box 9201	When was the debt incurred?	
	Old Bethpage, NY 11804  Number Street City State Zip Code	As of the date you file the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
		☐ Unliquidated	
	Debtor 2 only	☐ Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.28	Riverview Medical Center	Last 4 digits of account number 1200	\$159,21
20	Nonpriority Creditor's Name	1200 - algito of account number 1200	Ψ100.21
	Po Box 650292	When was the debt incurred?	
	Dallas, TX 75265-0292	A - of the date was file the plains in Oberel, all that are he	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_	☐ Contingent	
	Debtor 1 only	☐ Unliquidated	
	Debtor 2 only	☐ Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt	$\square$ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Various accounts	

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Debtor	1 Mary June Deppe	Case number (if known)		
4.29	Robert Wood Johnson	Last 4 digits of account number	\$271.00	
	Nonpriority Creditor's Name  Medical Group  PO Box 15278	When was the debt incurred?		
-	Newark, NJ 07192  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	■ Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	□ Yes			
	l res	Other. Specify		
4.30	Rutgers Nonpriority Creditor's Name	Last 4 digits of account number 9098	\$101.98	
	Robert Wood Johnson Medical	When was the debt incurred?		
	School			
	PO Box 15278			
	Newark, NJ 07192-5278  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes	■ Other. Specify		
		— Other. Specify		
4.31	Saker Shop Rite Nonpriority Creditor's Name	Last 4 digits of account number	Unknown	
	922 NJ33 Business Freehold, NJ 07728	When was the debt incurred?		
-	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent		
	■ Debtor 1 only	☐ Unliquidated		
	☐ Debtor 2 only	☐ Disputed		
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:		
	☐ At least one of the debtors and another	☐ Student loans		
	$\square$ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes	Other. Specify		

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Debtor	1 Mary June Deppe	Case number (if known)	
	Sears Credit Card	Last 4 digits of account number 0117	\$10,536.00
	Nonpriority Creditor's Name P.O. Box 183082 Columbus, OH 43218-3082	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.  Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	_	Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
	Syncb/Jcp	Last 4 digits of account number 2951	\$473.00
	Nonpriority Creditor's Name Po Box 965007 Orlando, FL 32896	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	■ Debtor 1 only	☐ Unliquidated	
	☐ Debtor 2 only	■ Disputed	
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
	Syncb/walmart	Last 4 digits of account number 9910	\$92.00
	Nonpriority Creditor's Name Po Box 965024	When was the debt incurred?	
	Orlando, FL 32896  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	Contingent	
	☐ Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	

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Case number (if known)

Debioi	Mary June Deppe	Case number (if known)	
4.35	TD Bank, N.A.	Last 4 digits of account number 9508	\$285.00
	Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred?	
	32 Chestnut St Lewiston, ME 04243		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
		☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.36	US Bank	Last 4 digits of account number 5119	\$63,179.00
	Nonpriority Creditor's Name		
	P.O. Box 790408 Saint Louis, MO 63179	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.37	Victoria Secret	Last 4 digits of account number 2973	\$792.16
	Nonpriority Creditor's Name P.O. Box 659728	When was the debt incurred?	
	San Antonio, TX 78265  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	•	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
Part 3:	List Others to Be Notified About a Debt	That You Already Listed	
trying more	to collect from you for a debt you owe to someon	It your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a e else, list the original creditor in Parts 1 or 2, then list the collection agency here. S ed in Parts 1 or 2, list the additional creditors here. If you do not have additional per- age.	imilarly, if you have
-	•	which entry in Part 1 or Part 2 did you list the original creditor?	
Aven	<b>ue</b> Lin	e 4.8 of (Check one):	
_	ox 659584 Antonio. TX 78265-9584	■ Part 2: Creditors with Nonpriority Unsecured Clair	ms

Last 4 digits of account number

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Debtor 1 Mary June Deppe		Case number (if known)	
Name and Address	On which entry in Part 1 or Part 2		
Avenue	Line 4.12 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
PO Box 60500 City of Industry, CA 91716		Part 2: Creditors with Nonpriority Unsecured Claims	
ony or madelly, or or no	Last 4 digits of account number		
Name and Address Barclays Bank	On which entry in Part 1 or Part 2 of Line <b>4.2</b> of (Check one):	did you list the original creditor?  □ Part 1: Creditors with Priority Unsecured Claims	
co Portfiolio Recovery		Part 2: Creditors with Nonpriority Unsecured Claims	
PO Box 41067 Norfolk, VA 23541			
1401101K, 17. 230-1	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?	
Capital One	Line 4.5 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
co Becket & Lee, LLP P.O. Box 3001		■ Part 2: Creditors with Nonpriority Unsecured Claims	
16 General Warren Blvd.			
Malvern, PA 19355-0701	Look 4 digita of appount number		
	Last 4 digits of account number		
Name and Address Capital One Bank, N.A.	On which entry in Part 1 or Part 2 of Line <b>4.5</b> of (Check one):	did you list the original creditor?  ☐ Part 1: Creditors with Priority Unsecured Claims	
PO Box 71083	Line 4.5 of (Check one).	Part 2: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims	
Charlotte, NC 28272-1083	Look 4 digite of account number	— Fart 2. Greators with Nonpholity Orisecured Glaims	
	Last 4 digits of account number		
Name and Address  Comenity Bank/avenue	On which entry in Part 1 or Part 2 of Line <b>4.8</b> of (Check one):	did you list the original creditor?  ☐ Part 1: Creditors with Priority Unsecured Claims	
co Quantum 3 Group LLC	Line 4.0 of (Check one).	Part 2: Creditors with Nonpriority Unsecured Claims	
PO Box 788		— Fart 2. Greators with Nonpholity Orisecured Glaims	
CP Medical LLC Kirkland, WA 98083			
Turniana, Trit 00000	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?	
Comenity Bank/capitsal fbb	Line 4.9 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
co Quantum 3 Group LLC CP Medical LLC		■ Part 2: Creditors with Nonpriority Unsecured Claims	
PO Box 788			
Kirkland, WA 98083	Last 4 digits of account number		
Name and Address  Credit First National Assoc	On which entry in Part 1 or Part 2 of Line <b>4.11</b> of (Check one):	did you list the original creditor?  ☐ Part 1: Creditors with Priority Unsecured Claims	
Attn: BK Credit Operations		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Po Box 81315 Cleveland, OH 44181			
Oleveland, Oli 44101	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?	
Credit First National Association	Line 4.11 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
P.O. Box 818011 Cleveland, OH 44181		Part 2: Creditors with Nonpriority Unsecured Claims	
Ciordiana, Cri Tirot	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?	
First Svgs Bk-blaze	Line 4.16 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
PO Box 5096 Sioux Falls, SD 57117		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?	
GECRB/Lowes	Line <b>4.18</b> of ( <i>Check one</i> ):	Part 1: Creditors with Priority Unsecured Claims	
P.O. Box 530914 Atlanta, GA 30353		Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?	

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Debtor 1 Mary June Deppe		Case number (if known)		
JC Penney P. O.Box 960090	Line <b>4.33</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims		
Orlando, FL 32896-0001	Last 4 digits of account number			
Name and Address Kay Jewelers 375 Ghent Rd. PO Box 1799	On which entry in Part 1 or Part 2 did you Line 4.22 of (Check one):	ou list the original creditor?  ☐ Part 1: Creditors with Priority Unsecured Claims  ☐ Part 2: Creditors with Nonpriority Unsecured Claims		
Akron, OH 44333	Last 4 digits of account number			
	<del>-</del>			
Name and Address <b>Kay Jewelers</b>	On which entry in Part 1 or Part 2 did you Line 4.22 of (Check one):	ou list the original creditor?  □ Part 1: Creditors with Priority Unsecured Claims		
PO Box 740425 Cincinnati, OH 45274		Part 2: Creditors with Nonpriority Unsecured Claims		
Cincillian, On 43274	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part 2 did y			
Kay Jewelers co Buckley King	Line <b>4.22</b> of ( <i>Check one</i> ):	Part 1: Creditors with Priority Unsecured Claims		
600 Superior Ave East, Ste 1400		Part 2: Creditors with Nonpriority Unsecured Claims		
Cleveland, OH 44114	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part 2 did y	ou list the original creditor?		
Kohls P.O. Box 2983	Line <b>4.23</b> of ( <i>Check one</i> ):	Part 1: Creditors with Priority Unsecured Claims		
Milwaukee, WI 53201-2983		■ Part 2: Creditors with Nonpriority Unsecured Claims		
	Last 4 digits of account number			
Name and Address Merrick Bank Corp	On which entry in Part 1 or Part 2 did you Line <b>4.27</b> of ( <i>Check one</i> ):	ou list the original creditor?  ☐ Part 1: Creditors with Priority Unsecured Claims		
co Resurgent Capital Services	. (* * * * * * * * * * * * * * * * * * *	■ Part 2: Creditors with Nonpriority Unsecured Claims		
PO Box 10368 Greenville, SC 29603-0368				
	Last 4 digits of account number			
Name and Address Syncb/walmart	On which entry in Part 1 or Part 2 did you Line <b>4.34</b> of ( <i>Check one</i> ):	ou list the original creditor?  Part 1: Creditors with Priority Unsecured Claims		
co Midland Funding	en (eneen ene).	Part 2: Creditors with Nonpriority Unsecured Claims		
PO Box 2011 Warren, MI 48090				
	Last 4 digits of account number			
Name and Address  Target	On which entry in Part 1 or Part 2 did yo Line 4.35 of (Check one):	ou list the original creditor?  ☐ Part 1: Creditors with Priority Unsecured Claims		
co Financial & Retail Svcs Mailstop BT PO Box 9475 Minneapolis, MN 55440		■ Part 2: Creditors with Nonpriority Unsecured Claims		
	Last 4 digits of account number			
Name and Address  Target	On which entry in Part 1 or Part 2 did you Line <b>4.35</b> of (Check one):	ou list the original creditor?  ☐ Part 1: Creditors with Priority Unsecured Claims		
PO Box 673	Line 4.33 of (Check one).	Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims		
Minneapolis, MN 55440	Last 4 digits of account number	· a. L. ordando minitorprioni, ordando diamie		
Name and Address	On which entry in Part 1 or Part 2 did y	ou list the original creditor?		
Target National Bank	Line 4.35 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
P. O. Box 659728 San Antonio, TX 78265-9728		Part 2: Creditors with Nonpriority Unsecured Claims		
	Last 4 digits of account number			
Name and Address  Target National Bank	On which entry in Part 1 or Part 2 did yo			
P.O. Box 660170	Line <u>4.35</u> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims		
Dallas, TX 75266-0170	Last 4 digits of account number	. En En Standia Militarphany Shadada diami		

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Debtor 1 Mary June Deppe	Case number (if known)			
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?			
TD Bank	Line 4.35 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
co Weinstein & Riley, P.S. 2001 Western Ave Ste 400 Seattle, WA 98121		■ Part 2: Creditors with Nonpriority Unsecured Claims		
	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?			
WebBank 215 State St. #800 Lake City, UT 84111	Line <b>4.15</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims		
		■ Part 2: Creditors with Nonpriority Unsecured Claims		
	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part 2	2 did you list the original creditor?		
WebBank	Line <b>4.15</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims		
13300 Pioneer Trail Eden Prairie, MN 55347		■ Part 2: Creditors with Nonpriority Unsecured Claims		
	Last 4 digits of account number			

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
IIOIIII ait i		•		· · · · · · · ·	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	102,336.43

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Fill in this information to identify your case:					
Debtor 1	Mary June Deppe	)			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JERSEY			
Case number (if known)					☐ Check if this is an
					amended filing

### Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Types. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

1	Person or	company with Name, Number	whom you have the , Street, City, State and ZIP	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.3	,				
	Name				<del></del>
	1401110				
					<u></u>
	Number	Street			
					_
	City		State	ZIP Code	
2.4					<u> </u>
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.5					
	Name				_
	Number	Street			_
	MULLIDEL	Succi			
	City		State	ZIP Code	_
	,				

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		Docume	m Page 37 C	)I / <b>T</b>	
Fill in this i	information to identify your	case:			
Dobtor 1	Mary June Denne				
Debtor 1	Mary June Deppe First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing	g) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	DISTRICT OF NEW JE	RSFY		
Office Glate	cs bankruptcy Court for the.	DIGITATO OF INEW OF	NOL I		
Case numb	er				
(if known)					☐ Check if this is an
					amended filing
Official	Form 106H				
Schedi	ule H: Your Cod	ebtors			12/15
				as complete and accurate as	
					ed, copy the Additional Page,
				to this page. On the top of a	ny Additional Pages, write
our name a	and case number (if known)	). Answer every question	1.		
1. Do y	ou have any codebtors? (If	you are filing a joint case,	do not list either spous	e as a codebtor.	
•	,		·		
■ No					
☐ Yes					
2 With	in the last 8 years, have you	Llived in a community n	ronarty state or territo	ory? (Community property stat	es and territories include
	i, California, Idaho, Louisiana				es and territories include
	,	,	, ,	,	
■ No. (	Go to line 3.				
☐ Yes.	Did your spouse, former spo	use, or legal equivalent liv	e with you at the time?		
3. In Colu	ımn 1. list all of vour codeb	tors. Do not include vou	r spouse as a codebto	or if vour spouse is filing wit	h you. List the person showr
in line	2 again as a codebtor only	if that person is a guarar	ntor or cosigner. Make	sure you have listed the cre	editor on Schedule D (Officia
	06D), Schedule E/F (Officia Column 2.	I Form 106E/F), or Sched	dule G (Official Form 1	06G). Use Schedule D, Sche	dule E/F, or Schedule G to
IIII Out	Column 2.				
	Column 1: Your codebtor				to whom you owe the debt
Na	ame, Number, Street, City, State and Z	IP Code		Check all schedules that	apply:
3.1				☐ Schedule D, line	
	lame			Schedule E/F, line	
				☐ Schedule G, line	<del></del>
	lumber Street ity	State	ZIP Code		
O	nty	Ciale	Zii Gode		
3.2				Schedule D, line	
N	lame			☐ Schedule E/F, line	
				☐ Schedule G, line	
N	lumber Street			_	
С	ity	State	ZIP Code		

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Eill	in this information to identify your c	ace.				Ì				
	otor 1 Mary June D									
	otor 2  ouse, if filing)	••			_					
Uni	ted States Bankruptcy Court for the	: DISTRICT OF NEW J	IERSEY							
	se number nown)		-			Check if this is:  An amende  A supplement	ed filing ent showir			
$\bigcirc$	fficial Form 106I							following date:		
	chedule I: Your Inc	nme				MM / DD/ Y	YYY		12/15	
sup spo atta	as complete and accurate as possible plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  **Describe Employment**	are married and not fili r spouse is not filing w	ng jointly, and your ith you, do not inclu	spouse de info	is li mati	ving with you, inc	lude infor ouse. If m	rmation abou nore space is	t your needed,	
1.	Fill in your employment information.					Debtor 2	Debtor 2 or non-filing spouse			
	If you have more than one job,	Empleyment status	■ Employed	☐ Emplo	oyed					
	attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed			mployed			
	employers.	Occupation	Disabled							
	Include part-time, seasonal, or self-employed work.	Employer's name								
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed to	here?							
Pai	Give Details About Mor	nthly Income								
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to r	eport fo	r any	line, write \$0 in the	e space. Ir	nclude your no	on-filing	
-	ou or your non-filing spouse have mo e space, attach a separate sheet to		ombine the informatio	n for all	emp	loyers for that pers	on on the	lines below. If	you need	
						For Debtor 1		btor 2 or ing spouse		
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	0.00	\$	N/A		
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	N/A		
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	0.00	\$	N/A		

Official Form 106l Schedule I: Your Income page 1

Debt	tor 1	Mary June Deppe	_	Case r	number (if known)				
				For	Debtor 1		btor 2 or		
	Сор	y line 4 here	4.	\$	0.00	\$	N/A	-	
5.	List	all payroll deductions:						_	
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	N/A		
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A	_	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	_	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A	_	
	5e.	Insurance	5e.	\$	0.00	\$	N/A	_	
	5f. 5g.	Domestic support obligations Union dues	5f. 5g.	\$ \$	0.00	\$	N/A N/A	_	
	5g. 5h.	Other deductions. Specify:	5g. 5h.⊣	· · —	0.00	·	N/A N/A	_	
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$ 	0.00	\$ 	N/A	-	
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	Ф Ф	0.00	\$	N/A	_	
			۲.	Ψ —	0.00	Ψ	IN/A	-	
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	0.5	<b>c</b>		<b>C</b>			
	8b.	monthly net income. Interest and dividends	8a. 8b.	\$ \$	0.00	\$	N/A		
	8c.	Family support payments that you, a non-filing spouse, or a dependent		Φ	0.00	Φ	N/A	_	
	00.	regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A	_	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A	_	
	8e.	Social Security	8e.	\$	1,550.00	\$	N/A	_	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	e 8f.	\$	0.00	\$	N/A		
	8g.	Pension or retirement income	8g.	\$	0.00	\$	N/A	_	
	8h.	Other monthly income. Specify: Soc Sec Death Benefit	8h.⊣	· · —	526.00		N/A	_	
		Local Union Pension	_	\$	795.00	\$	N/A		
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	2,871.00	\$	N/A	4	
10.	Calo	culate monthly income. Add line 7 + line 9.	10. \$		2,871.00 + \$		N/A = \$	2,871.00	
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.				·	-	2,07 1100	
11.	<ol> <li>State all other regular contributions to the expenses that you list in Schedule J.         Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.         Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.         Specify:</li></ol>								
12.		the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certaines					12. \$	2,871.00	
							Combii monthl	nea ly income	
13.	Do y ■	ou expect an increase or decrease within the year after you file this form No.	?					,	
		Yes. Explain: Help from Family & Friends as needed							

Official Form 106l Schedule I: Your Income page 2

Fill	in this information to identify you	ur case:						
Deb	otor 1 Mary June De	eppe			Ch	eck if this is:		
	otor 2ouse, if filing)						ling showing postpetition cha s of the following date:	pter
Unit	ted States Bankruptcy Court for the:	DISTRI	CT OF NEW JERSEY			MM / DD / YYY		
	se numbe <b>r</b>							
(If kı	nown)							
Of	fficial Form 106J							
So	chedule J: Your E	Exper	ises					12/15
info	as complete and accurate as ormation. If more space is nee mber (if known). Answer every	eded, atta	ch another sheet to this	e filing together, b form. On the top of	oth are ed f any add	qually responsib itional pages, w	ole for supplying correct rite your name and cas	e e
	Describe Your House	nold						
1.	Is this a joint case?							
	■ No. Go to line 2.  ☐ Yes, <b>Does Debtor 2 live i</b>	n a sonar	ate household?					
	□ No	i a sepai	ate nousenoiu:					
	= :	t file Offic	ial Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of D	ebtor 2.		
2.	Do you have dependents?	■ No						
	Do not list Debtor 1 and Debtor 2.	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?	
	Do not state the						□ No	
	dependents names.						Yes	
							□ No	
							□ No □ Yes	
							□ res □ No	
							☐ Yes	
3.	Do your expenses include expenses of people other the yourself and your dependent	an $_{\square}$	No Yes					
Est exp	t 2: Estimate Your Ongoin timate your expenses as of your expenses as of your expenses as of a date after the b	g Monthi ur bankrı	uptcy filing date unless y					
app	olicable date.							
the	lude expenses paid for with n value of such assistance and ficial Form 106I.)					Your	expenses	
4.	The rental or home ownersh payments and any rent for the			nclude first mortgage	e 4.	\$	1,135.81	
	If not included in line 4:							
	4a. Real estate taxes				4a.	\$	0.00	
	4b. Property, homeowner's,	, or renter	's insurance		4b.	\$	0.00	
	4c. Home maintenance, rep				4c.		100.00	
_	4d. Homeowner's association		dominium dues	ma aquitu lagas	4d.	\$	0.00	

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Transportation. Include gas, maintenance, bus or train fare.  Do not include car payments.  Entertainment, clubs, recreation, newspapers, magazines, and books  13. \$ 100.00 Charitable contributions and religious donations  14. \$ 20.00 Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15b. Life insurance  Do not include insurance deducted from your pay or included in lines 4 or 20.  15b. Life insurance  15c. \$ 50.00 15b. Health insurance  15c. \$ 100.00 15d. Other insurance. Specify: Delta Dental  15d. \$ 60.00  Amer Life  15d.	Debtor 1	Mary Jui	ne Deppe	Case nun	ber (if	known)
Electricity, heat, natural gas   6a. \$   210,00	1 14:1:	itios:				
Bot   Water, sewer, garbage collection   6c.   \$   400.00   Bot   Telephone, cell phone, Internet, satellite, and cable services   6c.   \$   400.00   Bot   Other, Specify   6d.   \$   0.00   Bot   Color, Specify   7   \$   430.00   Childcare and children's education costs   8   \$   0.00   Childcare and children's education costs   10   \$   80.00   Clothing, laundry, and dry cleaning   9   \$   80.00   Medical and dental expenses   10   \$   10.00   Medical and dental expenses   11   \$   120.00   Transportation include gas, maintenance, bus or train fare.   12   \$   300.00   Do not include car payments.   13   \$   100.00   Charitable contributions and religious donations   14   \$   20.00   Insurance.   Do not include insurance deducted from your pay or included in lines 4 or 20.   15a. Life insurance   15a.   \$   50.00   15b. Vehicle insurance   15c.   \$   60.00   Amer Life   \$   6.00   Taces, Do not include taxes deducted from your pay or included in lines 4 or 20.   Specify:   Insulance   15c.   \$   0.00   Taces, Do not include taxes deducted from your pay or included in lines 4 or 20.   Specify:   Insulance   15c.   \$   0.00   Taces, Do not include taxes deducted from your pay or included in lines 4 or 20.   Specify:   Insulance   15c.   \$   0.00   Taces, Do not include taxes deducted from your pay or included in lines 4 or 20.   Specify:   Insulance   15c.   \$   0.00   Taces, Do not include taxes deducted from your pay or included in lines 4 or 20.   Specify:   Insulance   15c.   \$   0.00   Taces, Do not include taxes deducted from your pay or included in lines 4 or 20.   Specify:   Insulance   15c.   \$   0.00   Taces, Do not include taxes deducted from your pay or included in lines 4 or 20.   Specify:   Insulance   15c.   \$   0.00   Taces, Do not include taxes deducted from your pay or included in lines 4 or 5 of this form or on Schedule I: Your Income.   Do not pay to the			heat natural das	63	2	210.00
6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other, Specify 6d. S. 0.000 Food and housekeeping supplies 7. \$ 430.00 Food and housekeeping supplies 8. \$ 0.00 Childcare and children's education costs 8. \$ 0.00 Clothing, Isundry, and dry cleaning 9. \$ 80.00 Personal care proclutes and services 10. \$ 10.00 Medical and dental expenses 11. \$ 120.00 Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 100.00 Charitable contributions and religious donations 14. \$ 20.00 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15b. \$ 50.00 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15c. Use his insurance 15c. \$ 100.00 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15c. Use his insurance 15d. Other insurance. 15d. Other insurance. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify: 17a. Car payments for Vehicle 1 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 1 17c. Other, Specify: 17d. Car payments for Vehicle 1 1		•				
6d.   S   0.00						
Food and housekeeping supplies Childcare and children's education costs 8. \$ 0.00 Clothing, laundry, and dry cleaning Personal care proclusts and services 10. \$ 10. \$ 10.00 Medical and dental expenses 11. \$ 120.00 Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 100.00 Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15b. Health insurance 15c. \$ 100.00 15c. Vehicle insurance expensery. 15d. Other insurance. 15d.		•			_	
Childrage and children's education costs   8. \$   8.0.00			·			
Clothing, laundry, and dry cleaning						-
Medical and dental expenses  Medical and dental expenses  11. \$ 120.00  Medical and dental expenses  12. \$ 300.00  Transportation. Include gas, maintenance, bus or train fare.  De not include car payments.  Entertainment, clubs, recreation, newspapers, magazines, and books  13. \$ 100.00  Charitable contributions and religious donations  14. \$ 20.00  Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15b. S 50.00  15b. Health insurance  15b. S 100.00  15c. Vehicle insurance  15b. S 100.00  15c. Vehicle insurance.  15d. Other insurance. Specity. Delta Dental  15d. Other insurance. Specity. Delta Dental  15d. N. Amer Life  15d. S 60.00  15d. Other insurance. Specity. Delta Dental  15d. S 60.00  15d. Other insurance. Specity. Delta Dental  15d. S 60.00  15d. Other insurance. Specity. Delta Dental  15d. S 60.00  15d. Other insurance. Specity. Delta Dental  15d. S 60.00  15d. Other Specity. S 60.00  15d. Other Specity. Specity. S 60.00  15d. Other Specity. Specity. S 60.00  15d. Other Specity. S 60.00  15d. O						-
Medical and dental expenses		-	· ·		: -	
Transportation. Include gas, maintenance, bus or train fare.  Do not include car payments.  Entertainment, clubs, recreation, newspapers, magazines, and books  13. \$ 100.00 Charitable contributions and religious donations  14. \$ 20.00 Charitable contributions and religious donations  15. \$ 100.00 Include insurance deducted from your pay or included in lines 4 or 20.  155. Left insurance  156. \$ 50.00 155. Left insurance  156. \$ 100.00 156. Vehicle insurance  156. \$ 100.00 156. Other insurance. Specify: Delta Dental  156. \$ 100.00 Amer Life  156. \$ 100.00 Amer Life  157. \$ 100.00 Amer Life  158. \$ 6.08 N. Amer Life  159. \$ 33.00 Amer Life  159. \$ 100.00 Amer Life  150. \$ 100.00 Amer Life					_	
Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Entertainment, clubs, recreation, newspapers, magazines, and books Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance 15b. Health insurance 15c. \$ 50.00  15c. Vehicle insurance 15c. \$ 100.00  15c. Vehicle insurance 15d. Ofter insurance, Speely: Delta Dental 15d. Ofter insurance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106i). Speely: Delta Dental 15d. Ofter real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 15d. Ofter real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 15d. Montgages on other property 15d. Ofter real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 15d. Montgages on other property 15d. Ofter Speely: Medicinal Marijuana 15d. Ofter Sp			•	11.	\$_	120.00
Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 100.00 Charitable contributions and religious donations 14. \$ 20.00 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. S 50.00 15d. Health insurance 15d. S 50.00 15d. Other insurance Specify: Delta Dental 15d. S 60.00 Amer Life 15d. S 60.00 Installment or lease payments: 16d. S 60.00 Installment or lease payments: 17d. Car payments for Vehicle 1 17a. \$ 0.00 Installment or lease payments: 17d. Car payments for Vehicle 2 17b. \$ 0.00 17d. Other. Specify: 17d.				12	\$	300.00
Charitable contributions and religious donations Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance.  15b. Health insurance.  15c. \$ 50.00  15c. Vehicle insurance. \$pecify: Delta Dental.  15d. Other insurance. \$pecify: \$ 60.00  15d. Other insurance. \$ 60						
Insurance   15a. \$ 50.00						
Do not include insurance deducted from your pay or included in lines 4 or 20.   15a. Life insurance			ributions and religious donations	14.	Φ _	20.00
15a			acurance deducted from your new or included in lines 4 or 20			
15b.   Health insurance   15b.   15c.   100.00			, , ,	150	Ф	50.00
15c. Vehicle insurance 15d. Other insurance. Specify: Delta Dental 15d. \$ 60.00 Amer Life						
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22a. Add lines 4 through 21.  22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2  22c. Add line 22a and 22b. The result is your monthly expenses.  Calculate your monthly net income.  23a. Copy line 12 (your combined monthly income) from Schedule I.  23a. \$ 2,871.00  23b. Copy your monthly expenses from line 22c above.  23c. Subtract your monthly expenses from your monthly income.  The result is your monthly net income.  23c. \$  -448.93  Do you expect an increase or decrease in your expenses within the year after you file this form?  For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?	. Calc	culate your	monthly expenses			
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2  22c. Add line 22a and 22b. The result is your monthly expenses.  \$ 3,319.93  Calculate your monthly net income.  23a. Copy line 12 (your combined monthly income) from Schedule I.  23a. \$ 2,871.00  23b. Copy your monthly expenses from line 22c above.  23c. Subtract your monthly expenses from your monthly income.  The result is your monthly net income.  23c. \$ -448.93  Do you expect an increase or decrease in your expenses within the year after you file this form?  For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?		-			\$	3,319.93
22c. Add line 22a and 22b. The result is your monthly expenses.  Calculate your monthly net income.  23a. Copy line 12 (your combined monthly income) from Schedule I.  23b. Copy your monthly expenses from line 22c above.  23c. Subtract your monthly expenses from your monthly income.  The result is your monthly net income.  23c. \$ -448.93  Do you expect an increase or decrease in your expenses within the year after you file this form?  For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?	22b.	. Copy line 2	2 (monthly expenses for Debtor 2), if any, from Official Form 1	106J-2		
Calculate your monthly net income.  23a. Copy line 12 (your combined monthly income) from Schedule I.  23b. Copy your monthly expenses from line 22c above.  23c. Subtract your monthly expenses from your monthly income.  The result is your monthly net income.  23c. \$					1 .	2 210 02
23a. Copy line 12 (your combined monthly income) from Schedule I.  23b. Copy your monthly expenses from line 22c above.  23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.  23c. \$	220.	. , wa iii lo ZZ	a and LLD. The result is your monthly expenses.		L	3,313.33
23a. Copy line 12 (your combined monthly income) from Schedule I.  23b. Copy your monthly expenses from line 22c above.  23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.  23c. \$	. Calc	culate your	monthly net income.			
23b. Copy your monthly expenses from line 22c above.  23b\$  3,319.93  23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .  23c. \$  -448.93  Do you expect an increase or decrease in your expenses within the year after you file this form?  For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?		-	· ·	23a.	\$	2,871.00
23c. Subtract your monthly expenses from your monthly income.  The result is your <i>monthly net income</i> .  23c. \$ -448.93  Do you expect an increase or decrease in your expenses within the year after you file this form?  For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?				23b.	-\$	
The result is your monthly net income.  23c. \$ -448.93  Do you expect an increase or decrease in your expenses within the year after you file this form?  For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?		177.	•			2,2.2.00
The result is your monthly net income.  23c. \$ -448.93  Do you expect an increase or decrease in your expenses within the year after you file this form?  For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?	23c	. Subtract v	your monthly expenses from your monthly income.			
Do you expect an increase or decrease in your expenses within the year after you file this form?  For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?				23c.	\$	-448.93
For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?			, ,			
	For e	example, do yo	ou expect to finish paying for your car loan within the year or do you expe			
■ No.						
□ Yes. Explain here:			Emilia hama			

■ No.	
□ Yes.	Explain here:

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Fill in this infor	mation to identify your	case:		
Debtor 1	Mary June Deppe	)		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JERSEY		
Case number (if known)				☐ Check if this is an amended filing
Official Forr <b>Declarat</b>		ın Individual Del	otor's Schedu	I <b>les</b> 12/15
obtaining money years, or both. 1	s form whenever you fi y or property by fraud in 8 U.S.C. §§ 152, 1341, 1 n Below	n connection with a bankruptcy	ended schedules. Making case can result in fines u	a false statement, concealing property, or p to \$250,000, or imprisonment for up to 20
Did you pa	y or agree to pay some	one who is NOT an attorney to	help you fill out bankruptc	ry forms?
■ No				
☐ Yes. I	Name of person			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
	lty of perjury, I declare e true and correct.	that I have read the summary a	nd schedules filed with thi	is declaration and
X /s/ Mar	y June Deppe		X	
Mary J	re of Debtor 1		Signature of Debtor 2	
Date	November 24, 2021		Date	

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Fill	in this infor	mation to identify yo	ur case:			
	otor 1	Mary June Dep				
		First Name	Middle Name	Last Name		
	otor 2 use if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Ba	ankruptcy Court for the	e: DISTRICT OF NEW JER	SEY		
Cas (if kn	e number _ own)				_	Check if this is an amended filing
Sta Be a infor	s complete mation. If n	and accurate as pos	Affairs for Individual sible. If two married people d, attach a separate sheet to	are filing together, both are	equally responsible for su	
num		n). Answer every qu Details About Your N	estion. Iarital Status and Where Yo	u Lived Before		
		ır current marital sta				
	☐ Married					
	■ Not ma					
2.	During the	last 3 years, have yo	u lived anywhere other than	where you live now?		
	■ No					
	☐ Yes. Lis	st all of the places you	lived in the last 3 years. Do r	ot include where you live now	٧.	
	Debtor 1 P	rior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
			ever live with a spouse or le California, Idaho, Louisiana, Ne			
	■ No □ Yes. M	ake sure you fill out S	chedule H: Your Codebtors (C	fficial Form 106H).		
Par	Expla	in the Sources of Yo	our Income			
	Fill in the tot	al amount of income y	employment or from operation on the contract of the contract o	all businesses, including part	t-time activities.	endar years?
	_	II in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)

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Debtor 1 Mary June Deppe Case number (if known)

5.	Include in unemploy	come regard ment, and o	dless of whet ther public b	her that inco	ome is taxable. I ents; pensions;	Examples rental inco	ous calendar years of other income are ome; interest; divide a income that you re	alimony; child sup nds; money collect	ed from laws	uits; royalties; and
	List each	source and	the gross inc	ome from ea	ach source sepa	arately. Do	not include income	e that you listed in	line 4.	
	□ No									
		Fill in the de	etails.							
				Describe to	of income below.	each (befo	ss income from n source ore deductions and usions)	Debtor 2 Sources of inc Describe below		Gross income (before deductions and exclusions)
	r last caler inuary 1 to	ndar year: December	31, 2020 )	Social S Benefits			\$26,371.00			
				Pension	Income		\$9,540.00			
		dar year be December		Social S Benefits			\$25,938.00			
				Pension	Income		\$9,859.00			
6.	■ Yes.	Neither Deindividual   During the   No.   Yes   * Subject Debtor 1 of During the	ebtor 1 nor leprimarily for a 90 days bef Go to line List below paid that continclude to adjustmentor Debtor 2 of 90 days bef Go to line List below include paran attorner	Debtor 2 ha a personal, f ore you filed 7. each creditor. Do n a payments t nt on 4/01/22 or both hav ore you filed 7. each creditor	amily, or house I for bankruptcy, or to whom you p not include paym to an attorney for 2 and every 3 year e primarily con I for bankruptcy,	nsumer do hold purpo , did you p paid a tota nents for c or this ban ears after r nsumer do , did you p	ebts. Consumer deal of \$6,825* or more domestic support ob kruptcy case. that for cases filed coebts. The pay any creditor a total of \$600 or more a ns, such as child su	tal of \$6,825* or me in one or more paligations, such as con or after the date tal of \$600 or more and the total amount apport and alimony.	ore?  ayments and child support of adjustmer  ??  t you paid tha Also, do not	
							paid	still owe		
7.	Insiders in corporation including a support an	nclude your ins of which one for a bu and alimony.	relatives; any you are an c	general par officer, direct perate as a	rtners; relatives or, person in co	of any ge ntrol, or o		nerships of which y e of their voting se	ou are a gene curities; and	
	Insider's	Name and	Address		Dates of payr	nent	Total amount	Amount you	Reason fo	or this payment
							paid	still owe		

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De	otor 1 N	lary June Deppe		Cas	e number (if known)			
8.	insider?	year before you filed for bankruptc		ments or transfer a	iny property on a	ccount of a d	ebt that benefited a	
	■ No	:. List all payments to an insider	g					
	Insider'	s Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name	
Pa	rt 4: Id	entify Legal Actions, Repossessions	s, and Foreclosures					
9.	List all s	year before you filed for bankruptouch matters, including personal injury of tions, and contract disputes.						
	■ No □ Yes	s. Fill in the details.						
	Case ti		Nature of the case	Court or agency		Status of th	e case	
10.	Check a	year before you filed for bankruptc: I that apply and fill in the details below		erty repossessed, f	oreclosed, garnis	hed, attached	d, seized, or levied?	
	_	Go to line 11.  Fill in the information below.						
	Credito	r Name and Address	Describe the Property  Explain what happened		Date		Value of the property	
11.	account No	0 days before you filed for bankrupt s or refuse to make a payment beca s. Fill in the details.		luding a bank or fii	nancial institution	ո, set off any ։	amounts from your	
	Credito	r Name and Address	Describe the action the	creditor took	Date taken	action was	Amount	
12.		year before you filed for bankruptc pointed receiver, a custodian, or an		erty in the possessi	ion of an assigne	e for the bene	efit of creditors, a	
	■ No Yes							
Pa		st Certain Gifts and Contributions						
13.		years before you filed for bankrupt	cy, did you give any gift	s with a total value	of more than \$60	00 per person	?	
		s. Fill in the details for each gift.						
	Gifts w	ith a total value of more than \$600 son	Describe the gifts		Dates the g	s you gave ifts	Value	
	Person Addres	to Whom You Gave the Gift and s:						
14.	■ No	years before you filed for bankrupt		s or contributions v	with a total value	of more than	\$600 to any charity	
	Gifts or	<ul> <li>Fill in the details for each gift or continuous to charities that total an \$600</li> </ul>		contributed	Dates	s you ibuted	Value	
	-	's Name S (Number, Street, City, State and ZIP Code)						

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other

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Deb	tor 1 Mary June Deppe			Case number (	(if known)				
	disaster, or gambling?								
	■ No □ Yes. Fill in the details.								
	Describe the property you lost and	Descril	be any insurance coverage for the l	oss	Date of your	Value of property			
	how the loss occurred		the amount that insurance has paid. It insurance claims on line 33 of Scheol.		loss	lost			
Par	17: List Certain Payments or Transfer	rs .							
	Within 1 year before you filed for bankru consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition	preparir	ng a bankruptcy petition?			rty to anyone you			
	□ No								
	Yes. Fill in the details.								
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You		Description and value of any property transferred		Date payment or transfer was made	Amount of payment			
	Oliver & Legg, LLC 2240 Highway 33 Suite 112		Attorney Fees			\$2,500.00			
	Neptune, NJ 07753 courtdocs@oliverandlegg.com								
	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?  Do not include any payment or transfer that you listed on line 16.								
	No								
	☐ Yes. Fill in the details.								
	Person Who Was Paid Address		Description and value of any property transferred		Date payment or transfer was made	Amount of payment			
	Within 2 years before you filed for bank transferred in the ordinary course of yo Include both outright transfers and transfer include gifts and transfers that you have al	<b>ur busin</b> rs made a	ess or financial affairs? as security (such as the granting of a		•				
	Yes. Fill in the details.			_					
	Person Who Received Transfer Address		Description and value of property transferred		any property or received or debts change	Date transfer was made			
	Person's relationship to you								
	Within 10 years before you filed for ban beneficiary? (These are often called asse ■ No □ Yes. Fill in the details.			self-settled tru	ust or similar device	of which you are a			
	Name of trust		Description and value of the prop	erty transferr	ed	Date Transfer was			
						made			

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Debtor 1 Mary June Deppe

Case number (if known)

Par	t 8: List of Certain Financial Accounts, Inst	truments, Safe Deposit	Boxes, and Sto	orage Units							
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associated to the cooperative of the cooperativ	other financial accou	nts; certificates	of deposit;							
	■ No □ Yes. Fill in the details.	ations, and other initial	iciai montanone	<b>.</b>							
		Last 4 digits of account number	Type of accourtinstrument	c m	ate account was losed, sold, noved, or ansferred	Last balance before closing or transfer					
21.	Do you now have, or did you have within 1 yo cash, or other valuables?	ear before you filed for	bankruptcy, an	y safe depos	sit box or other deposit	ory for securities,					
	■ No □ Yes. Fill in the details.										
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  Who else had access to it?  Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  Describe the contents  have it?										
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?										
	■ No □ Yes. Fill in the details.										
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	to it?	Address (Number, Street, City,			Do you still have it?					
Par	t 9: Identify Property You Hold or Control f	or Someone Else									
23.	Do you hold or control any property that som for someone.	neone else owns? Inclu	ude any property	y you borrov	ved from, are storing fo	or, or hold in trust					
	■ No □ Yes. Fill in the details.										
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe the	e property	Value					
Par	t 10: Give Details About Environmental Info	rmation									
For	the purpose of Part 10, the following definitio	ns apply:									
	Environmental law means any federal, state, toxic substances, wastes, or material into the regulations controlling the cleanup of these	e air, land, soil, surfac	e water, ground								
	Site means any location, facility, or property to own, operate, or utilize it, including dispos	-	environmental la	aw, whether	you now own, operate	or utilize it or used					
	Hazardous material means anything an envir hazardous material, pollutant, contaminant,		as a hazardous	waste, haza	rdous substance, toxic	substance,					
Rep	ort all notices, releases, and proceedings that	t you know about, rega	ardless of when	they occurr	ed.						
24.	Has any governmental unit notified you that	you may be liable or p	otentially liable	under or in v	violation of an environr	nental law?					
	■ No □ Yes. Fill in the details.										
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental uni Address (Number, St		Environr know it	mental law, if you	Date of notice					

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Debtor 1 Mary June Depte Case number (if known)

Del	otor 1	Mary June Deppe		Case number (if known)	
25.	Have	you notified any governmental unit o	f any release of hazardous material?		
		No Yes. Fill in the details.			
		ne of site Iress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have	you been a party in any judicial or ad	ministrative proceeding under any envi	ronmental law? Include settlements	and orders.
		No Yes. Fill in the details.			
		e Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Pai	rt 11:	Give Details About Your Business or	Connections to Any Business		
			•		
27.		_ ,	tcy, did you own a business or have an	•	y business?
		_	in a trade, profession, or other activity,	-	
			pany (LLC) or limited liability partnershi	ip (LLP)	
		A partner in a partnership			
		An officer, director, or managing ex	·		
		An owner of at least 5% of the votil	ng or equity securities of a corporation		
		No. None of the above applies. Go to	Part 12.		
		S.			
		siness Name Iress	Describe the nature of the business	Employer Identification numbe Do not include Social Security	
	(Num	nber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed	
28.		in 2 years before you filed for bankrup tutions, creditors, or other parties.	tcy, did you give a financial statement t	o anyone about your business? Incl	ude all financial
		No			
		Yes. Fill in the details below.			
	Nan	ne Iress	Date Issued		
		nber, Street, City, State and ZIP Code)			
Pai	rt 12:	Sign Below			
are with	true a n a ba	and correct. I understand that making a	nancial Affairs and any attachments, and false statement, concealing property, 6 \$250,000, or imprisonment for up to 20	or obtaining money or property by fr	
		/ June Deppe Ine Deppe	Signature of Debtor 2		
		re of Debtor 1	orginature or Desitor 2		
Dat	te N	lovember 24, 2021	Date		
Did ■ N	<b>1</b> 0	nttach additional pages to Your Statem	ent of Financial Affairs for Individuals F	Filing for Bankruptcy (Official Form 1	l <b>07)</b> ?
Did ■ N		pay or agree to pay someone who is no	ot an attorney to help you fill out bankru	ptcy forms?	
		ame of Person Attach the Bankr	uptcy Petition Preparer's Notice, Declaration	on, and Signature (Official Form 119).	
Offic	ial For	m 107 State	ment of Financial Affairs for Individuals Filing	for Bankruptcy	page (

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Debtor 1 Mary June Deppe Case number (if known)

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Fill in this inform	nation to identify your	case:				
Debtor 1	Mary June Deppe					
Debtor 2	First Name	Middle Name		Last Name		
(Spouse if, filing)	First Name	Middle Name		Last Name		
United States Ba	nkruptcy Court for the:	DISTRICT OF NE	W JERSEY			
Case number						☐ Check if this is an
						amended filing
041.15	4.0.0					
Official Fo						
Statemer	nt of Intentio	n tor Indiv	iduals	Filing Under Ch	apter /	12/15
If you are an indi	vidual filing under cha	pter 7, you must fil	l out this for	m if:		
_	e claims secured by yo					
You must file this	ver is earlier, unless th	ithin 30 days after	you file you	r bankruptcy petition or by the use. You must also send copi		
	ople are filing togethe	in a joint case, bo	th are equal	ly responsible for supplying c	orrect informat	ion. Both debtors must
	and accurate as possib our name and case nur		needed, att	ach a separate sheet to this fo	orm. On the top	of any additional pages,
Part 1: List Yo	our Creditors Who Hav	Secured Claims				
1. For any creditorinformation be		art 1 of Schedule D	: Creditors \	Who Have Claims Secured by I	Property (Offici	al Form 106D), fill in the
Identify the cre	editor and the property t	nat is collateral	What do y secures a	ou intend to do with the prope debt?		id you claim the property s exempt on Schedule C?
Creditor's <b>F</b> a	ay Servicing			ler the property. the property and redeem it.		] No
Description of	477 Center Ave Mi	,		he property and enter into a mation Agreement.		Yes
property	07748 Monmouth FMV \$213,167 Less			he property and [explain]:		
securing debt:	21,316	•				
Part 2: List Yo	our Unexpired Persona	Property Leases				
in the information	n below. Do not list rea	I estate leases. Un	expired leas	G: Executory Contracts and Uses are leases that are still in eloes not assume it. 11 U.S.C. §	ffect; the lease	
Describe your u	nexpired personal pro	perty leases			Will th	e lease be assumed?
Lessor's name:					□ No	
Description of lea Property:	ased				☐ Ye:	
					_	
Lessor's name: Description of lea	sed				□ No	
Property:					☐ Ye	s

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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De	btor 1 Mary J	June Deppe	Case number (if known	
	ssor's name:			□ No
	scription of leasoperty:	ed		☐ Yes
	,			La Tes
	ssor's name: scription of leas	ad		□ No
	pperty:	eu		☐ Yes
				_
	ssor's name: scription of leas	ed		□ No
	perty:			☐ Yes
Les	ssor's name:			□ No
	scription of leas	ed		
FIC	репу.			☐ Yes
	ssor's name:			□ No
	scription of leasoperty:	ed		☐ Yes
				La Tes
Pai	rt 3: Sign Be	low		
		erjury, I declare that I have indicat bject to an unexpired lease.	ted my intention about any property of my estate that s	ecures a debt and any personal
Χ	/s/ Mary Jur	ne Deppe	X	
	Mary June I		Signature of Debtor 2	
	Signature of D	Debtor 1		
	Date No	vember 24, 2021	Date	
	· · · · · · · · · · · · · · · · · · ·			<u> </u>

Fill in this info	rmation to identify your case:					Provident in this forms on	die Ferre
Debtor 1	Mary June Deppe			iecк one box 2A-1Supp:	only as c	lirected in this form and	d in Form
Debtor 2	mary durie Deppe						
(Spouse, if filing)				_	•	umption of abuse	
United States	Bankruptcy Court for the: District of New Jer	sey				to determine if a presu nade under <i>Chapter</i> 7	•
Case number						icial Form 122A-2).	Would Tool
(if known)						does not apply now by service but it could a	
				☐ Check i	f this is a	n amended filing	
Official F	Form 122A - 1						
Chapter	7 Statement of Your Cur	rent Mor	nthly Inc	ome			04/20
separate sheet to number (if know military service, Part 1:	and accurate as possible. If two married people ar to this form. Include the line number to which the a win. If you believe that you are exempted from a pre complete and file Statement of Exemption from Placulate Your Current Monthly Income	dditional informa esumption of abus resumption of Ab	tion applies. Oi se because you	n the top of ar do not have	ny addition primarily c	al pages, write your nam onsumer debts or becau	ne and case se of qualifying
_	your marital and filing status? Check one or narried. Fill out Column A, lines 2-11.	ııy.					
	led and your spouse is filing with you. Fill ou	ıt hoth Columne	A and B lines	s 2 <sub>-</sub> 11			
	ed and your spouse is NOT filing with you.			5 2-11.			
	ring in the same household and are not lega	-	-	olumns A an	d B. lines	2-11.	
□ Liv pe	ring separately or are legally separated. Fill or enalty of perjury that you and your spouse are leading apart for reasons that do not include evadir	out Column A, lir	nes 2-11; do n I under nonbai	ot fill out Col	lumn B. B that appli	y checking this box, yo	
101(10A). Fo 6 months, ad	erage monthly income that you received from all so or example, if you are filing on September 15, the 6-mo ld the income for all 6 months and divide the total by 6. tal property, put the income from that property in one of	nth period would b Fill in the result. D	e March 1 throughout the March 1 through the M	gh August 31. ny income amo	If the amou ount more the	int of your monthly income nan once. For example, if l	varied during the
				Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
	oss wages, salary, tips, bonuses, overtime, Il deductions).	and commission	ons (before	\$	0.00	\$	
	<b>and maintenance payments.</b> Do not include B is filled in.	payments from	a spouse if	\$	0.00	\$	
of you o from an and roon	unts from any source which are regularly pa or your dependents, including child support. unmarried partner, members of your household nmates. Include regular contributions from a sp Do not include payments you listed on line 3.	Include regular I, your depender	contributions nts, parents,	\$	0.00	\$	
5. Net inco	ome from operating a business, profession,		4 m . 4				
Cross ro	acinta (hafara all dadustiana)	Debt	tor 1				
	ceipts (before all deductions) and necessary operating expenses	-\$ 0.00					
•	thly income from a business, profession, or far	0.00	Copy here ->	•\$	0.00	\$	
6. Net inco	ome from rental and other real property						
		Debt	tor 1				
	ceipts (before all deductions)	\$ <u>0.00</u> -\$ 0.00					
•	and necessary operating expenses	· —	Copy here ->	\$	0.00	\$	
	thly income from rental or other real property	\$ 0.00	Copy note 5	\$ 	0.00	\$	
/. interest,	dividends, and royalties			Ψ			

Official Form 122A-1

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Case number (if known)

		Column A Debtor 1	Column B Debtor 2 or non-filing spouse			
8.	Unemployment compensation	\$ 0.00	\$			
	Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:					
	For you \$ 2,076.00					
	For your spouse \$					
9.	Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.	\$	\$			
10.	Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the coronavirus disease 2019 (COVID-19); payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below					
	·	\$0.00	\$			
		\$0.00	\$			
	Total amounts from separate pages, if any.	\$0.00	\$			
	Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	795.00 + \$	Total current monthly income			
Part	2: Determine Whether the Means Test Applies to You  Calculate your current monthly income for the year. Follow these steps:					
	12a. Copy your total current monthly income from line 11	Copy line 11 h	sere=> \$ 795.00			
	Multiply by 12 (the number of months in a year)		<b>x</b> 12			
	12b. The result is your annual income for this part of the form		12b. \$ <b>9,540.00</b>			
13.	Calculate the median family income that applies to you. Follow these steps:					
	Fill in the state in which you live.					
	Fill in the number of people in your household.					
	Fill in the median family income for your state and size of household.  To find a list of applicable median income amounts, go online using the link specified for this form. This list may also be available at the bankruptcy clerk's office.	I in the separate instruc	13. \$ 71,941.00			
14.	How do the lines compare?					
	14a. Line 12b is less than or equal to line 13. On the top of page 1, check box Go to Part 3. Do NOT fill out or file Official Form 122A-2.	x 1, There is no presum	nption of abuse.			
	14b.   Line 12b is more than line 13. On the top of page 1, check box 2, <i>The pr</i> Go to Part 3 and fill out Form 122A–2.	resumption of abuse is	determined by Form 122A-2.			
Part	3: Sign Below					
	By signing here, I declare under penalty of perjury that the information on this st	atement and in any atta	achments is true and correct.			
	χ /s/ Mary June Deppe					
	Mary June Deppe					

**Mary June Deppe** 

Debtor 1

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Debtor 1	Mary June Deppe	Case number (if known)	
	Signature of Debtor 1		
Da	November 24, 2021  MM / DD / YYYY		
	If you checked line 14a, do NOT fill out or file Form 122A-2.		
	If you checked line 14b, fill out Form 122A-2 and file it with this fo	rm.	

Debtor 1 Mary June Deppe Case number (if known)

#### **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 05/01/2021 to 10/31/2021.

#### Line 9 - Pension and retirement income

Source of Income: Union Local Pension Pmt

Income by Month:

6 Months Ago:	05/2021	\$795.00
5 Months Ago:	06/2021	\$795.00
4 Months Ago:	07/2021	\$795.00
3 Months Ago:	08/2021	\$795.00
2 Months Ago:	09/2021	\$795.00
Last Month:	10/2021	\$795.00
	Average per month:	\$795.00

#### Line 8 ssa - Unemployment compensation (Non-CMI)

Source of Income: **Soc Sec** 

Income by Month:

6 Months Ago:	05/2021	\$1,550.00
5 Months Ago:	06/2021	\$1,550.00
4 Months Ago:	07/2021	\$1,550.00
3 Months Ago:	08/2021	\$1,550.00
2 Months Ago:	09/2021	\$1,550.00
Last Month:	10/2021	\$1,550.00
	Average per month:	\$1,550.00

#### Line 8 ssa - Unemployment compensation (Non-CMI)

Source of Income: Soc Sec Death Benefit

Income by Month:

6 Months Ago:	05/2021	\$526.00
5 Months Ago:	06/2021	\$526.00
4 Months Ago:	07/2021	\$526.00
3 Months Ago:	08/2021	\$526.00
2 Months Ago:	09/2021	\$526.00
Last Month:	10/2021	\$526.00
	Average per month:	\$526.00

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7	:	Liquidation	
\$2	45	filing fee	
\$	78	administrative fee	
+ \$	15	trustee surcharge	
\$3	38	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$571 administrative fee \$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses">http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses</a>.

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses">http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses</a>.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 21-19099-CMG Doc 1 Filed 11/24/21 Entered 11/24/21 15:15:38 Desc Main Document Page 60 of 71

B2030 (Form 2030) (12/15)

### **United States Bankruptcy Court**District of New Jersey

In re	Mary June Deppe	Case No.			
	Debtor(s)	Chapter	7		
	DISCLOSURE OF COMPENSATION OF ATTO	RNEY FOR DE	CBTOR(S)		
C	cursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorompensation paid to me within one year before the filing of the petition in bankruptcy e rendered on behalf of the debtor(s) in contemplation of or in connection with the ba	y, or agreed to be paid	to me, for services rendered or to		
	For legal services, I have agreed to accept	s	2,500.00		
	Prior to the filing of this statement I have received	\$	2,500.00		
	Balance Due	\$	0.00		
2. \$	338.00 of the filing fee has been paid.				
3. T	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4. T	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5. <b>I</b>	I have not agreed to share the above-disclosed compensation with any other person	n unless they are memb	pers and associates of my law firm.		
[	☐ I have agreed to share the above-disclosed compensation with a person or persons copy of the agreement, together with a list of the names of the people sharing in the				
6. I1	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:				
b c	<ul> <li>Analysis of the debtor's financial situation, and rendering advice to the debtor in de</li> <li>Preparation and filing of any petition, schedules, statement of affairs and plan whic</li> <li>Representation of the debtor at the meeting of creditors and confirmation hearing, a</li> <li>[Other provisions as needed]</li> <li>Exemption planning and filing of reaffirmation agreements.</li> </ul>	h may be required;			
7. E	By agreement with the debtor(s), the above-disclosed fee does not include the followin Defense or prosecution of any adversarial complaint including no relief for stay motion; Challenge or avoidance of any proof of clair confirmation hearing; Motion for loan modification or to sell or re professional; Conversion from or to Chapter 7 to 13 or conversion settlement of controversy; Amendments to add additional credito searches, couriers, experts, travel and/or extraordinary Pacer or audit or United States Trustee objection to case: Preparation and	on-dischargeable; I m; Additional 341(a finance real estate n from or to Chapto ers; Costs relating t duplication costs/c	a) appearance or ; Application to employ er 13 to 7; Notice of to credit reports, judgment harges, etc. Response to		

The Debtor(s) has agreed that this office may hire another attorney to appear for the debtor(s) at the 341 hearing.

with secured creditors.

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In re	Mary June Deppe	Case No.	
	Debtor(s)		

#### DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sheet)					
CERTIFICATION					
I certify that the foregoing is a complete statem this bankruptcy proceeding.	ent of any agreement or arrangement for payment to me for representation of the debtor(s) in				
November 24, 2021  Date	/s/ William H. Oliver, Jr. William H. Oliver, Jr. Signature of Attorney Oliver & Legg, LLC 2240 Highway 33 Suite 112 Neptune, NJ 07753 732-988-1500 Fax: 732-775-7404 courtdocs@oliverandlegg.com Name of law firm				

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### **United States Bankruptcy Court**District of New Jersey

District of New Jersey							
In re	Mary June Deppe		Case No.				
		Debtor(s)	Chapter	7			
	VER	IFICATION OF CREDITOR	MATRIX				
The ab	ove-named Debtor hereby verifies	that the attached list of creditors is true and c	correct to the best	of his/her knowledge.			
Date:	November 24, 2021	/s/ Mary June Deppe Mary June Deppe					

Signature of Debtor

Ani Orthopaedics Suite 21, Bldg. #2 1 Bethany Road Hazlet, NJ 07730

Avenue PO Box 659584 San Antonio, TX 78265-9584

Avenue PO Box 60500 City of Industry, CA 91716

Bank Of America, N.a 4909 Savarese Circ Tampa, FL 33634

Barclays Bank co Portfiolio Recovery PO Box 41067 Norfolk, VA 23541

Barclays Bank Delaware Po Box 8803 Wilmington, DE 19899

Bathroom Pro 1545 Route 37 W Suite 6 Toms River, NJ 08755-4985

Boscov's PO Box 13601 Philadelphia, PA 19101-3601

Capital One 4851 Cox Rd Glen Allen, VA 23060

Capital One co Becket & Lee, LLP P.O. Box 3001 16 General Warren Blvd. Malvern, PA 19355-0701 Capital One Bank Usa N 15000 Capital One Dr Richmond, VA 23238

Capital One Bank, N.A. PO Box 71083 Charlotte, NC 28272-1083

Certified Credit & Collection P.O. Box 336 Raritan, NJ 08869

Comenity Bank/avenue Po Box 182789 Columbus, OH 43218

Comenity Bank/avenue co Quantum 3 Group LLC PO Box 788 CP Medical LLC Kirkland, WA 98083

Comenity Bank/capitsal fbb Po Box 18125 Columbus, OH 43218

Comenity Bank/capitsal fbb co Quantum 3 Group LLC CP Medical LLC PO Box 788 Kirkland, WA 98083

Comenity Bank/fashbug Po Box 182272 Columbus, OH 43218

Credit First Nationa 6275 Eastland Rd Brookpark, OH 44142

Credit First National Assoc Attn: BK Credit Operations Po Box 81315 Cleveland, OH 44181 Credit First National Association P.O. Box 818011 Cleveland, OH 44181

Credit One Bank
P.O. box 98873
Las Vegas, NV 89193

Discover P.O. Box 71084 Charlotte, NC 28272

Dr. Chi I. Lee 717 N Beers Street Holmdel, NJ 07733

Fay Servicing PO Box 88009 Chicago, IL 60680-1009

Fingerhut Direct Marketing Customer Service 6250 Ridgewood Rd. Saint Cloud, MN 56303

First Svgs Bk-blaze 5501 S Broadband Ln Sioux Falls, SD 57108

First Svgs Bk-blaze PO Box 5096 Sioux Falls, SD 57117

Fortiva Att Bankruptcy PO Box 105555 Atlanta, GA 30348

GECRB/Lowes P.O. Box 965005 Orlando, FL 32896

GECRB/Lowes P.O. Box 530914 Atlanta, GA 30353 GECRB/Modell's P.O. Box 960014 Orlando, FL 32896

GECRB/Mohawk Floorscape P.O. Box 960014 Orlando, FL 32896

Home Depot P.O. Box 182676 Columbus, OH 43218-2676

Internal Revenue Service Special Procedures Bankruptcy Section P.O. Box 724 Springfield, NJ 07081

JC Penney
P. O.Box 960090
Orlando, FL 32896-0001

Kay Jewelers co Sterling Jewelers PO Box 1799 Akron, OH 44309

Kay Jewelers 375 Ghent Rd. PO Box 1799 Akron, OH 44333

Kay Jewelers co Buckley King 600 Superior Ave East, Ste 1400 Cleveland, OH 44114

Kay Jewelers PO Box 740425 Cincinnati, OH 45274

Kohls P.O. Box 2983 Milwaukee, WI 53201-2983 Kohls/capital One N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051

Macy's P.O. Box 183083 Columbus, OH 43218

MCS Claim Services, Inc. 123 Frost St., Suite 150 Westbury, NY 11590-5027

Meridan Health Po Box 9319 Trenton, NJ 08650

Merrick Bank Corp Po Box 9201 Old Bethpage, NY 11804

Merrick Bank Corp co Resurgent Capital Services PO Box 10368 Greenville, SC 29603-0368

Riverview Medical Center Po Box 650292 Dallas, TX 75265-0292

Robert Wood Johnson Medical Group PO Box 15278 Newark, NJ 07192

Rutgers Robert Wood Johnson Medical School PO Box 15278 Newark, NJ 07192-5278

Saker Shop Rite 922 NJ33 Business Freehold, NJ 07728 Sears Credit Card P.O. Box 183082 Columbus, OH 43218-3082

State of New Jersey Department of the Treasury Division of Taxation P.O. Box 187 Trenton, NJ 08695-0187

Syncb/Jcp Po Box 965007 Orlando, FL 32896

Syncb/walmart Po Box 965024 Orlando, FL 32896

Syncb/walmart co Midland Funding PO Box 2011 Warren, MI 48090

Target co Financial & Retail Svcs Mailstop BT PO Box 9475 Minneapolis, MN 55440

Target PO Box 673 Minneapolis, MN 55440

Target National Bank P. O. Box 659728 San Antonio, TX 78265-9728

Target National Bank P.O. Box 660170 Dallas, TX 75266-0170

TD Bank co Weinstein & Riley, P.S. 2001 Western Ave Ste 400 Seattle, WA 98121 TD Bank, N.A. Attn: Bankruptcy 32 Chestnut St Lewiston, ME 04243

US Bank
P.O. Box 790408
Saint Louis, MO 63179

Victoria Secret P.O. Box 659728 San Antonio, TX 78265

WebBank 215 State St. #800 Lake City, UT 84111

WebBank 13300 Pioneer Trail Eden Prairie, MN 55347

#### 11 U.S.C. § 527(a)(2) Disclosure

In accordance with section 527(a)(2) of the Bankruptcy Code, be advised that:

- 1. All information that you are required to provide with a bankruptcy petition and during a bankruptcy case must be complete, accurate, and truthful.
- 2. All assets and liabilities must be completely and accurately disclosed, with the replacement value of each asset as defined in section 506 listed after reasonable inquiry to establish such value.
- 3. Current monthly income, the amounts specified in the "means test" under section 707(b)(2), and disposable income in chapter 13 cases must be stated after reasonable inquiry.
- 4. Information that you provide during your bankruptcy case may be audited, and the failure to provide such information may result in dismissal of the case or other sanction, including a criminal sanction.

# IMPORTANT INFORMATION ABOUT BANKRUPTCY ASSISTANCE SERVICES FROM AN ATTORNEY OR BANKRUPTCY PETITION PREPARER.

If you decide to seek bankruptcy relief, you can represent yourself, you can hire an attorney to represent you, or you can get help in some localities from a bankruptcy petition preparer who is not an attorney. THE LAW REQUIRES AN ATTORNEY OR BANKRUPTCY PETITION PREPARER TO GIVE YOU A WRITTEN CONTRACT SPECIFYING WHAT THE ATTORNEY OR BANKRUPTCY PETITION PREPARER WILL DO FOR YOU AND HOW MUCH IT WILL COST. Ask to see the contract before you hire anyone.

The following information helps you understand what must be done in a routine bankruptcy case to help you evaluate how much service you need. Although bankruptcy can be complex, many cases are routine.

Before filing a bankruptcy case, either you or your attorney should analyze your eligibility for different forms of debt relief available under the Bankruptcy Code and which form of relief is most likely to be beneficial for you. Be sure you understand the relief you can obtain and its limitations. To file a bankruptcy case, documents called a Petition, Schedules, and Statement of Financial Affairs, and in some cases a Statement of Intention, need to be prepared correctly and filed with the bankruptcy court. You will have to pay a filing fee to the bankruptcy court. Once your case starts, you will have to attend the required first meeting of the creditors where you may be questioned by a court official called a 'trustee' and by creditors.

If you choose to file a chapter 7 case, you may be asked by a creditor to reaffirm a debt. You may want help deciding whether to do so. A creditor is not permitted to coerce you into reaffirming your debts.

If you choose to file a chapter 13 case in which you repay your creditors what you can afford over 3 to 5 years, you may also want help with preparing your chapter 13 plan and with the confirmation hearing on your plan which will be before a bankruptcy judge.

If you select another type of relief under the Bankruptcy Code other than chapter 7 or chapter 13, you will want to find out what should be done from someone familiar with that type of relief.

Your bankruptcy case may also involve litigation. You are generally permitted to represent yourself in litigation in bankruptcy court, but only attorneys, not bankruptcy petition preparers, can give you legal advice.